



OPA DATABASE GUIDE
FOR
PUBLIC USERS
CONTRACT PHARMACIES

MARCH 2013
VERSION 5.0

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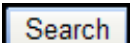
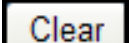
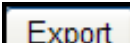



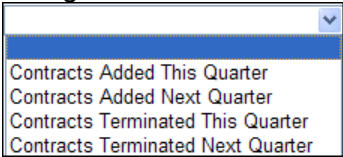


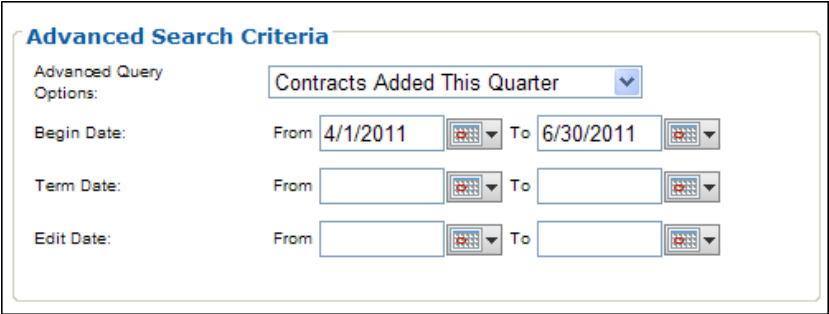
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SEARCH CONTRACT PHARMACIES

Objectives:

- Searching and Search Results for Contract Pharmacies
- Viewing Contract Pharmacy Details
- Viewing Pharmacy Details
- Exporting Data

SEARCHING CONTRACT PHARMACIES	
DETAILS	EXAMPLE
<p><i>Search Screen Functionality</i></p> <ul style="list-style-type: none"> • CP Search Criteria screen provides access to active and terminated records for: <ul style="list-style-type: none"> – Contract Pharmacy Details – Pharmacies and history – Covered entities • Data exports for selected records. • State field: Defaults to All. <p>Tip - Multiple States can be selected by holding down the Control key.</p> <p>Tip – Select a range of states by holding down the Shift key.</p> <ul style="list-style-type: none"> •  button initiates the search. •  button clears all fields with data. •  button exports data to an Excel spreadsheet based on the criteria selected. 	

SEARCHING CONTRACT PHARMACIES	
DETAILS	EXAMPLE
<ul style="list-style-type: none"> Entity Name field searches on: <ul style="list-style-type: none"> Partial names entered for Covered Entity and Subdivision Name. Entity Name returns results with Entity/Subdivision Names as part of the name. For example, entering East in the field, search results would include combinations for Covered Entities with “east” in the name. Returns could be names such as, Eastern Hospital, Southeast Center, etc. <p>CP Advanced Search Criteria</p> <p>Advanced Search Criteria provides advanced query options for specific criteria.</p> <ul style="list-style-type: none"> Selecting from the drop-down auto-populates the date range fields. Date range fields can be changed. 	  

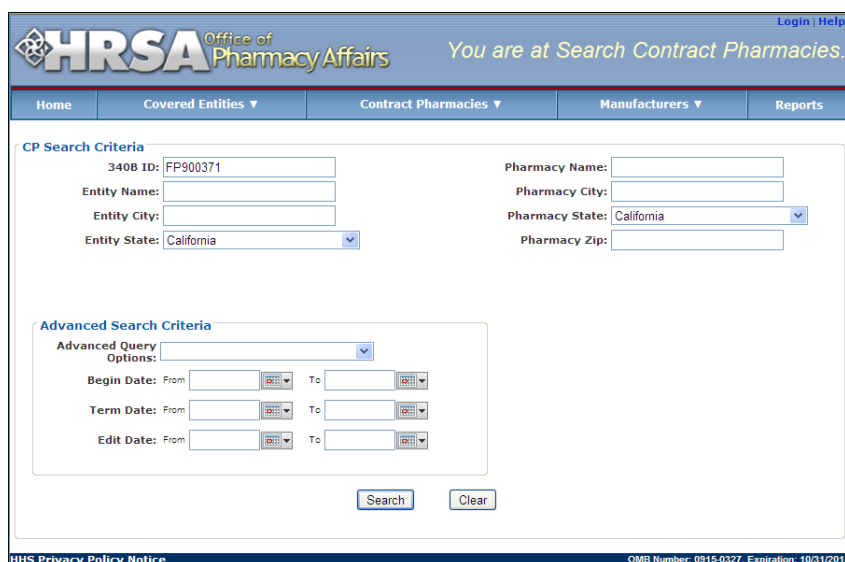
SEARCHING CONTRACT PHARMACIES

DETAILS

Searching Contract Pharmacies

1. Click on Search Contract Pharmacies link and the **CP Search** screen displays.
2. Enter information in applicable fields.
3. Click the **Search** button and the **Search Results** table displays.

EXAMPLE

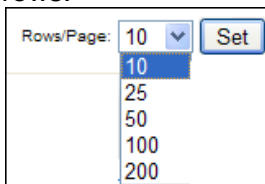



SEARCHING CONTRACT PHARMACIES

DETAILS

Search Results Table

- Search Results display in uniform table format.
- Number of rows display default is 10, can be set be to 10 to 200 rows.



- Columns are sortable. Click any column heading to change sort to descending order. The default is by ascending order of 340B ID.



- checkbox selects all records in the Search Results table, not just the current screen.
- Click a **Detail** link and the Contract Pharmacy Details record displays.
- Click on a 340B ID number (i.e., **FP004219**) which links to the Covered Entity Details record.
- Click a Pharmacy name link (i.e., **Evers Pharmacy**) and basic details and link to CP Details display.

Show Search Criteria

- button returns to Search screen, with results maintained.

Hide Search Criteria

- hides the Search screen.


EXAMPLE

Provides total number of results returned.



Contract ID	Entity Name	Entity City	St	Pharmacy Name	Address	City	St	Zip	Start Date	Term Date
Detail FP004219	PLANNED PARENTHOOD ASSOC. OF UTAH	WEST VALLEY CITY	UT	SMITH'S MANAGEMENT CORP DBA	SMITH'S FOOD & DRUG #88 PHARMACY 4055 SOUTH REDWOOD ROAD	SALT LAKE CITY	UT	84123	08/14/2004	
Detail FP009368	UNIVERSITY OF PUERTO RICO	RIO PIEDRAS	PR	FARMACIA SAN MARTIN, MANATI INC.	CPLAZA PUERTA DEL SOL 54 CARR. #2 SUITE 3	MANATI	PR	00674	11/06/2009	
Detail FP028795	THUNDERMIST OF SOUTH COUNTY	WAKEFIELD	RI	RHODE ISLAND CVS PHARMACY, L.L.C.	DBA: CVS PHARMACY #02055 11 MAIN ST.	WAKEFIELD	RI	02879	05/01/2007	
Detail FP073069	HORIZON HEALTH CENTER	JERSEY CITY	NJ	HEALTH CARE PHARMACY	103 SUMMIT AVENUE	JERSEY CITY	NJ	07304	03/08/2006	
Detail FP104607	COMMUNITY HEALTHCARE NETWORK	BRONX	NY	PD PHARMACY, LLC	888 EAST 163RD STREET	BRONX	NY	10459	06/30/2008	
Detail FP152212	METRO FAMILY PRACTICE	PITTSBURGH	PA	COORDINATED CARE NETWORK	STE405 300 PENN CENTER BLVD	PITTSBURGH	PA	15235	08/29/2002	01/31/2012
Detail FP171021	HAMILTON HEALTH CENTER INC	HARRISBURG	PA	MEDICINE SHOPPE	1921 FULTON STREET	HARRISBURG	PA	17102	04/15/2006	
Detail FP191025	PUBLIC HEALTH MANAGEMENT CORPORATION	PHILADELPHIA	PA	WASHINGTON SQUARE PHARMACY	INC. 241 SOUTH 6TH STREET	PHILADELPHIA	PA	19106	07/01/2004	
Detail FP191026	PUBLIC HEALTH MANAGEMENT CORPORATION	PHILADELPHIA	PA	WASHINGTON SQUARE PHARMACY	INC. 241 SOUTH 6TH STREET	PHILADELPHIA	PA	19106	07/01/2004	
Detail FP191071	MAZZONI CENTER	PHILADELPHIA	PA	WALGREEN EASTERN CO., INC.	DBA: WALGREENS 1800 SOUTH ST.	PHILADELPHIA	PA	19146	07/01/2010	

- Lists number of pages at the bottom, which changes if the number of rows/pages is changed. Click on the next number to view the next group of records.



VIEWING CONTRACT PHARMACY DETAILS

DETAILS

EXAMPLE

Viewing Contract Details

- Click the **Detail** link for the applicable contract pharmacy and the record displays.
- Contract Details record is view only providing information on:
 - Approval Date
 - Contract Begin Date
 - Contract Termination Date
 - Contract Termination Reason
 - Contract Comments
 - Links to Covered Entity Details and Pharmacy Details
- Click the **Cancel** button and the CP Search screen displays.



HRSA Office of Pharmacy Affairs You are at Search Contract Pharmacies.

Home Covered Entities Contract Pharmacies Manufacturers Reports

Search Results: The number of rows returned: 6 Rows Page: 10 Set Show Search Criteria Export Results

Select	Contract Detail	340B ID	Entity Name	Entity City	St	Pharmacy Name	Address	City	St	Zip	Start Date	Term Date
<input type="checkbox"/>	Detail	FP900371	ST. JOHN'S WELL CHILD AND FAMILY CENTER	LOS ANGELES	CA	EVERYTHING PHARMACY RELATED II INC, DBA	1245 WILSHIRE BLVD	LOS ANGELES	CA	90017	08/23/2012	02/28/2013
<input type="checkbox"/>	Detail	FP900371	ST. JOHN'S WELL CHILD AND FAMILY CENTER	LOS ANGELES	CA	RALPHS GROCERY CO	DBA RALPHS #39 250 S LA BREA AVE	LOS ANGELES	CA	90036	08/23/2012	
<input type="checkbox"/>	Detail	FP900371	ST. JOHN'S WELL CHILD AND FAMILY CENTER	LOS ANGELES	CA	RALPHS GROCERY CO.	DBA RALPHS #284 10772 JEFFERSON BLVD	CULVER CITY	CA	90230	08/23/2012	
<input type="checkbox"/>	Detail	FP900371	ST. JOHN'S WELL CHILD AND FAMILY CENTER	LOS ANGELES	CA	RALPHS GROCERY CO.	DBA RALPHS #022 045 W 9TH ST	LOS ANGELES	CA	90016	08/23/2012	
<input type="checkbox"/>	Detail	FP900371	ST. JOHN'S WELL CHILD AND FAMILY CENTER	LOS ANGELES	CA	RALPHS GROCERY CO.	DBA RALPHS #010 070 S WESTERN AVE	LOS ANGELES	CA	90005	08/23/2012	
<input type="checkbox"/>	Detail	FP900371	ST. JOHN'S WELL CHILD AND FAMILY CENTER	LOS ANGELES	CA	RALPHS GROCERY CO	DBA RALPHS #111 2201 W REDONDO BEACH BLVD	GARDENA	CA	90247	08/23/2012	

Page 1 of 1

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HRSA Office of Pharmacy Affairs You are at Contract Detail.

Home Covered Entities Contract Pharmacies Manufacturers Reports

Contract Details

Approval Date: 8/23/2012
 Contract Begin Date: 8/23/2012 Contract Termination Date: 2/28/2013 Contract Termination Reason: Business decision by covered entity
 Contract Comments:

Covered Entity Details [View Entity Details](#)

340B ID: FP900371
 Entity Name: ST. JOHN'S WELL CHILD AND FAMILY CENTER
 Entity Sub-Division Name: Entity Type: FP
 Grant/Provider Number: FHPA092020
 Start Date: 4/1/2006
 Termination Date: 8/08 58th Street
 Address: LOS ANGELES, CA 90037

Contract Pharmacy Details [View Pharmacy Details](#)

Name: EVERYTHING PHARMACY RELATED II INC, DBA
 Address: 1245 WILSHIRE BLVD
 Comments: LOS ANGELES, CA 90017-4810

Covered Entity Signing Official

Name: James Mangia
 Title: CEO
 Phone: 323-541-1600 Ext: 4001
 Signed By Date: 7/17/2012

Contract Pharmacy Representative

Name: Mohammad Eminan
 Title: Pharmacist in Charge
 Phone: 213-481-1130 Ext:

Record Info

Edit Date: 3/7/2013 11:17:24 AM

Cancel

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VIEWING PHARMACY DETAILS

DETAILS

EXAMPLE

Viewing Pharmacy Details

- Click on the applicable Pharmacy Name link on Results table and the Contract Pharmacy Details section displays.
 - Contract Pharmacy Details screen provides pharmacy name, address, and comments.
- Click on **Contracts** tab and the Contracts section displays. to view all contracts associated with the pharmacy.
 - Contracts section provides:
 - Table of all contracts associated with the pharmacy selected.
 - Links to view the Contract Details records.
 - Links to Covered Entities Details records (i.e., 340B ID).
- Click the **History** tab and the History section displays.
 - Section displays changes to the pharmacy address and the timestamp changes were made.

Select	Contract Detail	340B ID	Entity Name	Entity City	St	Pharmacy Name	Address	City	St	Zip	Start Date	Term Date
<input type="checkbox"/>	Detail	FP900371	ST. JOHN'S WELL CHILD AND FAMILY CENTER	LOS ANGELES	CA	EVERYTHING PHARMACY RELATED II INC, DBA	1245 WILSHIRE BLVD	LOS ANGELES	CA	90017	08/23/2012	02/28/2013



HRSA Office of Pharmacy Affairs Login / Help

You are at Pharmacy Detail.

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

EVERYTHING PHARMACY RELATED II INC, DBA

[Details](#) [Contracts](#) [History](#)

Contract Pharmacy Details

Name: EVERYTHING PHARMACY RELATED II INC, DBA
Address: 1245 WILSHIRE BLVD
LOS ANGELES, CA 90017-4810
Comments:

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You are at Pharmacy Detail.

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

EVERYTHING PHARMACY RELATED II INC, DBA

[Details](#) [Contracts](#) [History](#)

Contracts

The number of rows returned: 7 Rows/Page: 10 Set

Select	Contract Detail	340B ID	Entity Type	Entity Name	Sub Name	Address	City	State	Begin Date	Term Date	Edit Date
<input type="checkbox"/>	Detail	CH091037A	Consolidated Health Center Program	ST. JOHN'S WELL CHILD AND FAMILY CENTER	St. John's Well Child and Family Center	2115 N. WILMINGTON	COMPTON	CA	08/23/2012		03/01/2013
<input type="checkbox"/>	Detail	CH099000	Consolidated Health Center Program	EAST VALLEY COMMUNITY HEALTH CENTERS INC		439 S. GLENORA AVENUE	WEST COVINA	CA	07/01/2012		03/01/2013
<input type="checkbox"/>	Detail	DSH050373	Disproportionate Share Hospital	LOS ANGELES COUNTY DEPARTMENT OF HEALTH SERVICES - USC MEDICAL CENTER		1200 N. STATE ST. RM 1A10109	LOS ANGELES	CA	08/20/2012		03/01/2013
<input type="checkbox"/>	Detail	DSH050471	Disproportionate Share Hospital	GOOD SAMARITAN HOSPITAL		616 SOUTH WITTBER STREET	LOS ANGELES	CA	04/08/2009		03/01/2013
<input type="checkbox"/>	Detail	FP900371	Family Planning (Title X only)	ST. JOHN'S WELL CHILD AND FAMILY CENTER		808 58th Street	LOS ANGELES	CA	08/23/2012	02/28/2013	03/07/2013
<input type="checkbox"/>	Detail	RW190003	Ryan White Part A	Los Angeles County Department of Health Services	Hubert Humphrey Comprehensive Health Center	5850 South Main Street	Los Angeles	CA	08/20/2012		03/01/2013
<input type="checkbox"/>	Detail	RW190059	Ryan White Part A	Los Angeles County Department of Health Services	Martin L. King, Jr. Multi-Services Ambulatory Care Center	12021 S. Wilmington Avenue, Room T2-053	Los Angeles	CA	08/20/2012		03/01/2013

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HRSA Office of Pharmacy Affairs Login / Help

You are at Pharmacy Detail.

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

EVERYTHING PHARMACY RELATED II INC, DBA

[Details](#) [Contracts](#) [History](#)

Search Results

The number of rows returned: 2 Rows/Page: 10 Set

Field	Event	Value Before	Value After	Timestamp
Pharmacy Name	DEA Update	TOTAL REMEDY AND PRESCRIPTION CENTER	EVERYTHING PHARMACY RELATED II INC, DBA	3/4/2013 5:32:39 PM
Pharmacy Address	DEA Update	1245 WILSHIRE BLVD LOS ANGELES, CA 90017	1245 WILSHIRE BLVD LOS ANGELES, CA 90017-4810	3/4/2013 5:32:39 PM

1

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VIEWING COVERED ENTITY DETAILS

DETAILS

Viewing CE Details

1. Click the 340B ID link (i.e., **FP004219**) on the Search Results table and applicable CE Details record displays.
- CE Details is view-only screen.
 - Each tab navigates to a different section.



*For guidance on covered entity functionality and navigation, go to **HRSA OPA Homepage**, under **Useful Links** section select the **User Guides** link.*

2. Click on any tab to view the details for that section.
3. Click the **Print** button to print a copy of the record.
Click the **Cancel** button and return to the CP Search screen.

EXAMPLE

<input type="checkbox"/> Select All	<input type="checkbox"/> Contract Detail	340B ID	Entity Name	Entity City	St	Pharmacy Name	Address	City	St	Zip	Start Date	Term Date
<input type="checkbox"/>	Detail	FP900371	ST. JOHN'S WELL CHILD AND FAMILY CENTER	LOS ANGELES	CA	EVERYTHING PHARMACY RELATED II INC, DBA	1245 WILSHIRE BLVD	LOS ANGELES	CA	90017	09/23/2012	02/28/2013



The screenshot shows the HRSA Office of Pharmacy Affairs interface. The top navigation bar includes 'Home', 'Covered Entities', 'Contract Pharmacies', 'Manufacturers', and 'Reports'. The 'Covered Entities' tab is selected, showing details for 'FP900371 - ST. JOHN'S WELL CHILD AND FAMILY CENTER'. Below the header, there are tabs for 'Details', 'Addresses', 'Dates', 'Medicaid', 'Contacts', 'Contract Pharmacy', 'Parent/Child', 'Recert Mgt', and 'History'. The 'Details' tab is active, displaying the following information:


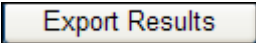

- 340B ID:** FP900371
- Entity Name:** ST. JOHN'S WELL CHILD AND FAMILY CENTER
- Entity Type:** Family Planning (Title X only)
- Entity Sub-Division Name:** FAMILY CENTER
- Grant Number:** FPHPA092020
- Medicare Provider Number:**

At the bottom of the details section are 'Cancel' and 'Print' buttons. The footer of the page includes the 'HHS Privacy Policy Notice' and 'OMB Number: 0915-0327, Expiration: 10/31/2015'.

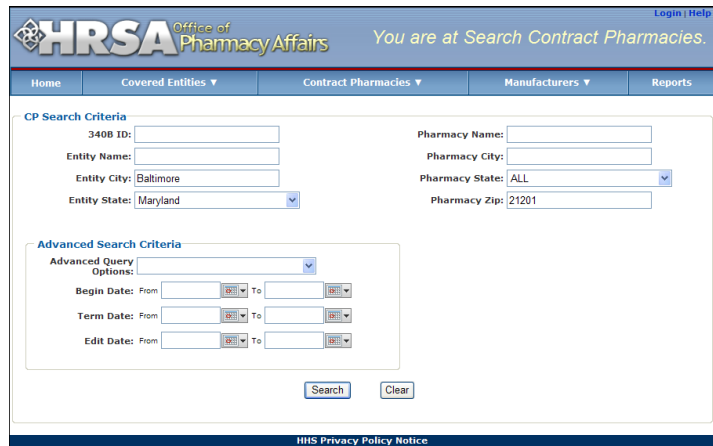
EXPORTING DATA & REPORTS

DETAILS

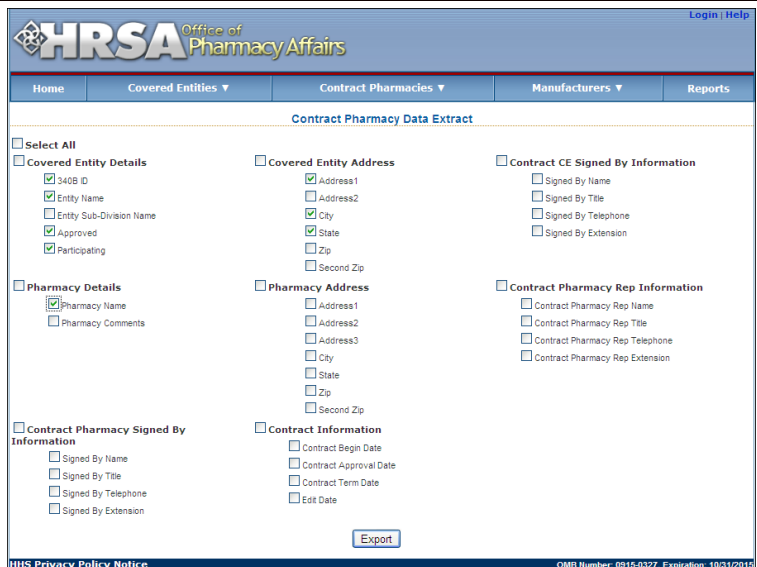
Exporting Results

- Exporting data for specific Contract Pharmacy records, initiates from conducting a CP Search.
- Enter search criteria and Search Results table displays.
 - Click on checkbox(es)  for Contract Pharmacy record(s) to export.
 - Click the  button, and the Contract Pharmacy Data Extract screen displays.
 - Select checkbox(es)  for headings to be selected for a particular section, or select specific checkboxes for data fields.
 - Default setting: all checkboxes are blank.
 - Select All – all categories and checkboxes are indicated.
 - Category headings (i.e., Covered Entity Details) indicate all checkboxes for that heading.
 - Individual checkboxes indicates only a checkbox for a particular item listed.
 - Click on checkbox to deselect.

EXAMPLE



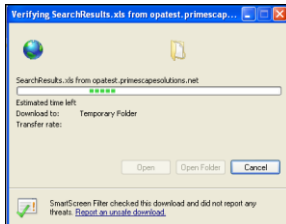

Contract ID	Entity Name	Entity City	St	Pharmacy Name	Address	City	St	Zip	Start Date	Term Date
CH031278	FAMILY HEALTH CENTERS OF BALTIMORE, INC.	BALTIMORE	MD	PROFESSIONAL PHARMACY SERVICES, INC DBA NEIGHBORCARE MERCY	301 ST PAUL PLACE	BALTIMORE	MD	21201	05/10/2007	
CH031690	HEALTH CARE FOR THE HOMELESS, INC.	BALTIMORE	MD	WIENNER, INC	T/A MT. VERNON PHARMACY 800 CATHEDRAL STREET	BALTIMORE	MD	21201	02/22/2002	



EXPORTING DATA & REPORTS

DETAILS

- Click the **Export** button and a warning message displays.
- Click the **OK** button and the File Download window displays.
- Select **Open** button to open file, or **Save** button to save file. Verify Search Results window displays.



- Excel spreadsheet displays. This is a partial view.

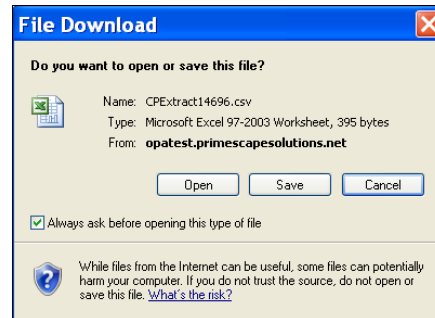
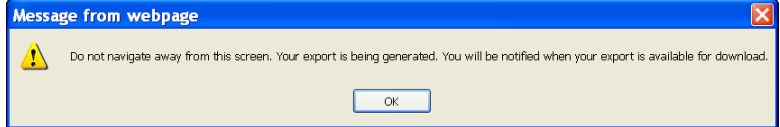


A message window may display, stating the file download may be in a different format. Click the **Yes button to and the Excel spreadsheet displays. Or, Click the **No** button to cancel.**

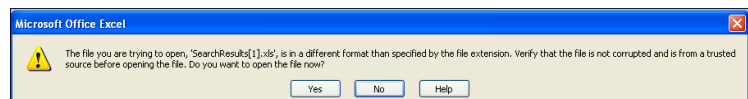
Export Displaying Multiple Rows

- Since it is possible for a Covered Entity to have multiple contract pharmacies and multiple shipping addresses, an export will display a **separate row** for each possible combination. For this example, the Covered Entity has 14 contract pharmacies for a total of 14 rows.

EXAMPLE



	A	B	C	D	E	F	G	H
1	340B ID	Entity Name	Approved	Participating	Entity Address1	Entity City	Entity State	Pharmacy Name
2	CH031278	FAMILY HEALTH CENTERS OF BALTIMORE, INC.	TRUE	TRUE	315 N CALVERT STREET	BALTIMORE	MD	PROFESSIONAL PHARMACY SERVICES, INC DBA NEIGHBORCARE MERCY
3	CH031890	HEALTH CARE FOR THE HOMELESS, INC.	TRUE	TRUE	421 FALLSWAY	BALTIMORE	MD	WIENNER, INC



	A	B	C	D	E	F	G	H
1	340B ID	Entity Name	Entity Address1	Entity State	Pharmacy Name	Pharmacy Address1	Pharmacy City	Pharmacy State
2	CH090030	SUN LIFE FAMILY HEALTH CENTER, INC.	865 NORTH ARIZONA ROAD	AZ	Walmart Pharmacy # 1218	1741 East Florence Blvd.	Casa Grande	AZ
3	CH090030	SUN LIFE FAMILY HEALTH CENTER, INC.	865 NORTH ARIZONA ROAD	AZ	Walmart Pharmacy # 2778	1695 North Arizona Blvd.	Coolidge	AZ
4	CH090030	SUN LIFE FAMILY HEALTH CENTER, INC.	865 NORTH ARIZONA ROAD	AZ	Walmart Pharmacy # 4430	41650 West Maricopa Casa Grande	Maricopa	AZ
5	CH090030	SUN LIFE FAMILY HEALTH CENTER, INC.	865 NORTH ARIZONA ROAD	AZ	Safeway Pharmacy #1706	1837 North Trekeville Rd	Casa Grande	AZ
6	CH090030	SUN LIFE FAMILY HEALTH CENTER, INC.	865 NORTH ARIZONA ROAD	AZ	Fry's Food and Drug #660-048	1385 EAST FLORENCE BLVD.	CASA GRANDE	AZ
7	CH090030	SUN LIFE FAMILY HEALTH CENTER, INC.	865 NORTH ARIZONA ROAD	AZ	Walgreens # 10505	2785 N. PINAL AVE	CASA GRANDE	AZ
8	CH090030	SUN LIFE FAMILY HEALTH CENTER, INC.	865 NORTH ARIZONA ROAD	AZ	Walgreens # 1076	333 HUNT HIGHWAY	QUEEN CREEK	AZ
9	CH090030	SUN LIFE FAMILY HEALTH CENTER, INC.	865 NORTH ARIZONA ROAD	AZ	Walgreens # 10998	2483 E FLORENCE BLVD	CASA GRANDE	AZ
10	CH090030	SUN LIFE FAMILY HEALTH CENTER, INC.	865 NORTH ARIZONA ROAD	AZ	Walgreens # 3447	12965 N ORACLE RD	ORO VALLEY	AZ
11	CH090030	SUN LIFE FAMILY HEALTH CENTER, INC.	865 NORTH ARIZONA ROAD	AZ	Walgreens # 4344	1514 E. FLORENCE BLVD	CASA GRANDE	AZ
12	CH090030	SUN LIFE FAMILY HEALTH CENTER, INC.	865 NORTH ARIZONA ROAD	AZ	Walgreens # 6129	2021 N. PINAL AVE.	CASA GRANDE	AZ
13	CH090030	SUN LIFE FAMILY HEALTH CENTER, INC.	865 NORTH ARIZONA ROAD	AZ	Walgreens # 9264	21274 N JOHN WAYNE PKWY	MARICOPA	AZ
14	CH090030	SUN LIFE FAMILY HEALTH CENTER, INC.	865 NORTH ARIZONA ROAD	AZ	Walgreens # 9652	1575 N ARIZONA BLVD	COOLIDGE	AZ

REGISTER CONTRACT PHARMACY

Objectives:

- Registering a Contract Pharmacy
- Adding other Contract Pharmacies
- Viewing Contract Pharmacies
- Request Contract Pharmacy Terminations

REGISTERING CONTRACT PHARMACY

Helpful Tips for an Online Contract Pharmacy Registration Request



Submission of an online contract pharmacy registration request is an automated process. A contract pharmacy registration request must be completed during the same browser session. There is no way to save a contract pharmacy registration request once it has been initiated.

Registering contract pharmacy can *only* be submitted for covered entities that are actively participating or pending approval in the HRSA OPA 340B Program. This includes covered entities with a future participating start date.

Contract pharmacies **cannot** be submitted for:

- Covered Entity that has been terminated and no longer participating in 340B Program.
- Covered Entity has a Change Request pending OPA approval.
- Covered Entity undergoing Recertification and OPA review.

The authorizing official for the covered entity has responsibility to review the contract pharmacy registration request once submitted, and approve or reject the request.

The authorizing official has 15-calendar days to approve or reject the contract pharmacy registration request. If the authorizing official does not approve or reject the request within 15-calendar days, then on calendar day 16, the system automatically “expires” the request.



IMPORTANT: Use the buttons provided on the screens to navigate through the system. Refrain from using the browser back  and forward buttons, as they may take you out of the registration process.


REGISTERING A CONTRACT PHARMACY

DETAILS


Registering a Contract Pharmacy

1. Click the Register a Contract Pharmacy link on the **OPA 340B Homepage** and the **Caution** pop-up screen displays.

EXAMPLE


Login | Help

[Home](#)
[Covered Entities ▼](#)
[Contract Pharmacies ▼](#)
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[Reports](#)



Useful Links

- » [Help](#)
- » [Reports](#)
- » [User Guides](#)
- » [Forms](#)
- » [DSH Adjustment Percentages](#)
- » [Termination Codes](#)
- » [Archived Medicaid Exclusion Files](#)
- » [Covered Entity Acronyms](#)
- » [Notes](#)
- » [Contacts](#)

Covered Entities

- » [Search Covered Entities](#)
- » [Search Medicaid Exclusion File](#)
- » [Register a Covered Entity](#)
- » [Register an Outpatient Facility](#)
- » [Submit Change Request](#)

Contract Pharmacies

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- » [Register a Contract Pharmacy](#)
- » [Request Contract Terminations](#)

Manufacturers

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What's New

STD/TB PROGRAM RECERTIFICATION UPDATE (12/21/2012)

This is to notify CDC TB/STD grantees participating in the 340B Program that annual recertification for your site(s) will not occur until Summer/Fall 2013. HRSA's Office of Pharmacy Affairs (OPA) will notify participating CDC TB/STD grantees in advance of recertification. OPA will provide a timeline for recertification including the educational opportunities that will be available to the covered entity's listed Authorizing Official (AO) and Primary Contact as well as communication with our Federal CDC Partners.

DATABASE ENHANCEMENTS (10/4/2012)

The Office of Pharmacy Affairs will use this space to announce enhancements to the 340B Database as they occur. If you have a suggestion for how we can further improve the database, please send a message to us via the "Questions, Comments, or Suggestions" link at the bottom of the screen.

- 10/4/2012 – added alternate print functionality for covered entity details.
- 8/9/2012 – added online covered entity change requests.
- 4/19/2012 – added tabbed view of covered entity details as well as new history section (changes on or after 7/15/2011).
- 12/23/2009 – added pharmacy comments field.
- 05/04/2009 – made major improvement in reports, including conversion to csv files to improve performance, updated order of fields, field names, etc.
- 01/01/2009 – rearranged Grant/Provider number and Entity Type fields in the record view.
- 04/24/2008 – added online registration for FP covered entities.
- 02/20/2008 – added Start and Termination Date columns to the "Children Entities" and "Other Related Entities" displays.

Important Notifications

UPDATE FOR COVERED ENTITY/CONTRACT PHARMACY REGISTRATIONS (1/29/2013)

The 340B covered entity and contract pharmacy registration period for a start date of 4/1/2013 has closed; registrations will next be accepted from 4/1/2013 through 4/15/2013 for a start date of 7/1/2013. Registrations will continue to be accepted at other times from organizations in states with declared **public health emergencies** (currently New York; the declaration for New Jersey has expired). For assistance with New York registrations, contact OPA at 340BRegistration@hrsa.gov.

For hospitals; OPA requires copies of several documents to verify eligibility. Please review the supplemental **hospital registration instructions** carefully and submit the applicable documents on the same day that online registration is completed; registrations not accompanied by complete and correct documentation will be deleted and will not be reviewed (entities whose registrations have been deleted will be notified and can re-register until the last day of the registration period).

Please e-mail or fax materials to the appropriate address for your organization type; your Medicare provider number should be in the subject of the e-mail or prominently on the fax cover sheet:

Registration Type	E-mail address	Fax
Disproportionate Share Hospitals	340BRegistrationDSH@hrsa.gov	301-443-6571
Critical Access Hospitals	340BRegistrationCAH@hrsa.gov	301-443-6572
Sole Community Hospitals	340BRegistrationSCH@hrsa.gov	301-443-6573
Rural Referral Centers	340BRegistrationRRC@hrsa.gov	301-443-6574
Freestanding Cancer Hospitals	340BRegistrationC@hrsa.gov	301-443-6575
Pediatric Hospitals	340BRegistrationPED@hrsa.gov	301-443-6576

For Consolidated Health Center (CHC) program entities: If the address of a site being registered does not appear in HRSA's Electronic Handbooks (EHB) system on the same day that the online registration is submitted, the registration will be deleted. If necessary, contact your HRSA project officer for assistance.

For other non-hospital covered entities: No additional documents are required at registration, although OPA may request additional information during our review of your registration material.

For contract pharmacy registrations: Covered entities will be provided with a contract certification form upon completion of the online registration process. Once signed by the entity's authorizing official and an authorized pharmacy representative, the form must be returned to OPA via e-mail to 340BContractPharmacy@hrsa.gov or fax to 301-443-6577.

For all entities: Original signed certifications and other documents may be retained by the entity if e-mailed or faxed, but copies may also be sent via overnight courier at the entity's discretion.

Health Resources and Services Administration
4th Office of Pharmacy Affairs
5600 Fishers Lane, 10C-03
Rockville, MD 20857

ONLINE COVERED ENTITY CHANGE REQUESTS

Entities may follow the "Submit Change Request" link on the 340B database home page to submit updated names, addresses, contact information and/or Medicaid billing details; all changes will be forwarded to the entity's Authorizing Official for acceptance prior to being reviewed by OPA staff. For additional guidance, refer to the change request user guide located under the "Useful Links" section above.

Please note that **paper change request forms** are still required for entity termination requests, changes to Authorizing Officials and/or changes to contract pharmacy relationships or manufacturer information. Paper requests for changes that can be made online are no longer being accepted; entities do not need to resubmit previously submitted paper requests online.

You are entering an official US Government computer network! NEVER save your user-ID or password when accessing this system (especially on non-government computers). Please Note: You are entering an official United States government system, which may be used only for authorized purposes. This system may contain nonpublic HRSA information within the meaning of 12 CFR 4.320(b) that is subject to use and disclosure restrictions specified at 12 CFR 4.37. The unauthorized use or disclosure of nonpublic HRSA information or the unauthorized modification of any information stored on this system may result in criminal prosecution or administrative proceedings.

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915-0327. Public reporting burden for this collection of information is estimated to average one to two hours per response for registration and thirty minutes for recertification, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-20, Rockville, Maryland, 20857.

HHS Privacy Policy Notice

U.S. Department of Health and Human Services (HHS)
Health Resources and Services Administration (HRSA)
Office of Pharmacy Affairs (OPA) - 340B Program


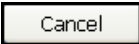
March 04, 2013
9:21 AM ET

OMB Number: 0915-0327, Expiration: 10/31/2015

Questions, Comments, or Suggestions
Email Us: ApexusAnswers@340bpvp.com
Call Us: 1 - 888 - 340 - 2787

REGISTERING A CONTRACT PHARMACY

DETAILS

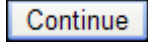
- Read the information pertaining to contract pharmacy registration.
- Click the  button to continue and the **Instructions and Pre-Qual** screen displays. Click the  button to discontinue the process.

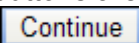
Instructions and Pre-Qual Questions

- Review the Instructions in their entirety.
- Click the “Yes” radio buttons to answer all the required Pre-Qualification questions.



Answering “No” to any question takes user to Pre-Qualification Answers screen, and discontinues the contract pharmacy registration.

- Click the  button and the Search screen displays.

- If “Yes” or “No” radio buttons are not selected, and the  button is clicked, then error messages display for questions without answers.

EXAMPLE

Message from webpage

Caution

You are about to begin the contract pharmacy registration process. Do not continue unless you have been expressly authorized to do so by an authorized official of the covered entity. Before starting, please review the contract pharmacy user guide to ensure successful submission of the registration and avoid potential delays.

Please also review the following before starting the contract pharmacy registration process:

1. Communicate with the covered entity – Ensure that the covered entity's authorizing official is aware of your attempt to register the contract pharmacy relationship, and that he or she will need to respond to an automated confirmation e-mail.
2. Update covered entity information – The 340B covered entity's address, authorizing official, primary contact and qualifying information must be complete and correct in the program registration database. Do not attempt to register a contract pharmacy arrangement if the covered entity profile needs updating; submit a change request with the necessary updates to the Office of Pharmacy Affairs instead.
3. Be accurate – Select the appropriate pharmacy when entering your arrangements and ensure that pharmacy representative email addresses are entered accurately.

4. Avoid delays – Make sure the covered entity's authorizing official and the contract pharmacy representative have adjusted their email spam blockers/filters to accept messages from 340Bcontractpharmacy@hrsa.gov. OPA will not be responsible for lost/deleted emails.

Fraudulent registrations could potentially subject the covered entity to punitive measures, which could ultimately result in the disqualification and removal of the covered entity from the 340B program.

HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

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Instructions

Covered entities that plan to utilize contract pharmacy arrangements to dispense drugs purchased under the 340B Drug Pricing Program must register the arrangements online and must certify electronically that fully executed agreement(s) are in effect with the contract pharmacy or pharmacies.

All agreements must satisfy the elements outlined in the [guidelines](#) that govern the operation and compliance of contract pharmacies for 340B covered entities. Prior to registration, covered entities are strongly encouraged to have their legal counsel review all contracts and associated documents to ensure compliance with applicable Federal, State and local requirements. OPA will not review contracts.

IMPORTANT NOTE: The contract pharmacy registration process must be started and completed within the same browser session. Incomplete online registrations cannot be saved for later submission. Do not submit a contract pharmacy registration if you are unsure of the information you are providing, or if contract terms are still under negotiation and/or not fully executed. It is imperative that contract pharmacy registrations are submitted accurately to avoid lengthy delays in 340B implementation.

START DATE – The Contract Pharmacy start date is set at the time OPA approves the contract pharmacy arrangement or at a later date if requested. The contract pharmacy arrangement should not begin prior to the start date shown on the OPA database. OPA will NOT post a retroactive start date. The contract pharmacy start date may not precede the registration date of the covered entity. For example, an organization added as a covered entity for the April 1, 2013 quarter may not have a contract pharmacy start date prior to April 1, 2013.

SUBMISSION PROCESS – Once you have registered a contract pharmacy online, the covered entity's authorizing official will receive an e-mail with instructions for certifying the arrangement. The authorizing official must perform this task within 15 calendar days from the time the online registration was completed, or the arrangement will be deleted and the registration process must be restarted. The contract pharmacy registration process is not complete until the arrangement has been certified by the authorizing official; email notifications will be sent to the authorizing official and the contract pharmacy representative at that time.

Pre-Qualification Questions

IMPORTANT: You must respond to the following questions before registering a contract pharmacy for the 340B program.

1. Are you authorized by the covered entity to submit this request? ☒ Yes ☐ No
2. Is the covered entity already approved for the 340B Program? ☒ Yes ☐ No
3. Do you know the 340B ID number? ☒ Yes ☐ No
4. Has the written contract between the covered entity and the pharmacy been fully executed by both parties? (Do NOT register a contract pharmacy arrangement if the contract terms are still under negotiation.) ☒ Yes ☐ No

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Pre-Qualification Questions

IMPORTANT: You must respond to the following questions before registering a contract pharmacy for the 340B program.

1. Are you authorized by the covered entity to submit this request? ☐ Yes ☐ No

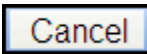
Please select an answer for Pre-Qualification Question 1

REGISTERING A CONTRACT PHARMACY

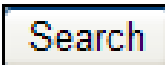
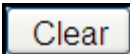
DETAILS

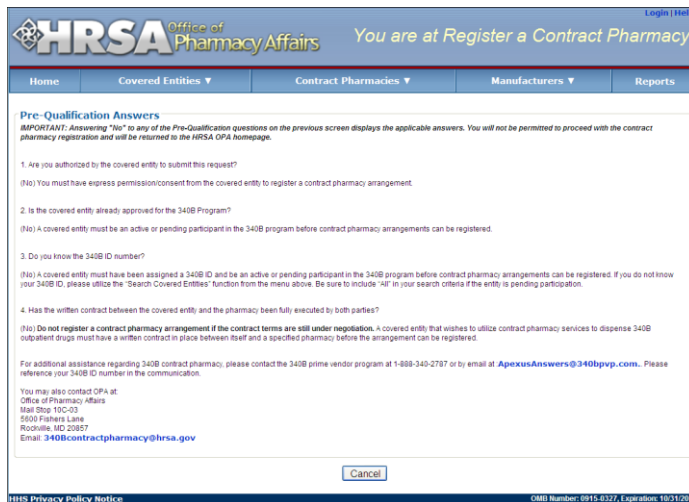
EXAMPLE

Pre-Qual Answers

- **Pre-Qual Answers** screen provides answers to the Pre-Qual questions when “No” radio button is selected.
-  button cancels the contract pharmacy registration and returns the user to the **OPA 340B Homepage**.

Search Criteria

1. Enter a 340B ID number in the 340B ID field, and the system validates if the covered entity is actively participating in 340B Program.
 2. Click the  button to continue.
- With an exact 340B ID number, the **Results** table is omitted and user is directed to the **Covered Entity Authorizing Official Verification** screen.
 - When a partial 340B ID number is entered, the **Results** table displays and the user is required to select the applicable covered entity.
 - A partial number can be entered, but must contain a minimum of four characters.
-  button clears the field.



HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

Home Covered Entities Contract Pharmacies Manufacturers Reports

Pre-Qualification Answers

IMPORTANT: Answering "No" to any of the Pre-Qualification questions on the previous screen displays the applicable answers. You will not be permitted to proceed with the contract pharmacy registration and will be returned to the HRSA OPA homepage.

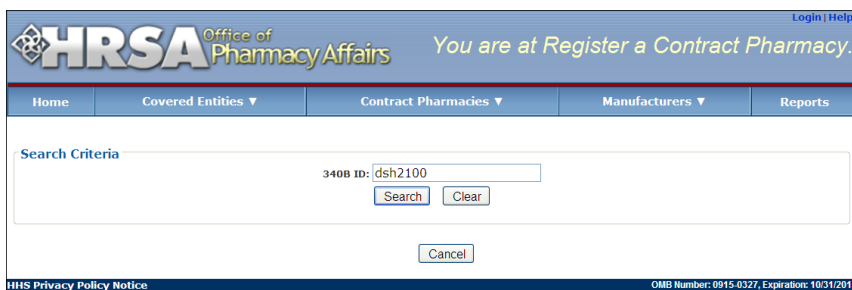
1. Are you authorized by the covered entity to submit this request?
(No) You must have express permission/consent from the covered entity to register a contract pharmacy arrangement.
2. Is the covered entity already approved for the 340B Program?
(No) A covered entity must be an active or pending participant in the 340B program before contract pharmacy arrangements can be registered.
3. Do you know the 340B ID number?
(No) A covered entity must have been assigned a 340B ID and be an active or pending participant in the 340B program before contract pharmacy arrangements can be registered. If you do not know your 340B ID, please utilize the "Search Covered Entities" function from the menu above. Be sure to include "40" in your search criteria if the entity is pending participation.
4. Has the written contract between the covered entity and the pharmacy been fully executed by both parties?
(No) Do not register a contract pharmacy arrangement if the contract terms are still under negotiation. A covered entity that wishes to utilize contract pharmacy services to dispense 340B outpatient drugs must have a written contract in place between itself and a specified pharmacy before the arrangement can be registered.

For additional assistance regarding 340B contract pharmacy, please contact the 340B prime vendor program at 1-800-340-2787 or by email at ApexusAnswers@340bpvp.com. Please reference your 340B ID number in the communication.

You may also contact OPA at:
Office of Pharmacy Affairs
Mail Stop 10C-03
5600 Fishers Lane
Rockville, MD 20857
Email: 340bcontractpharmacy@hhsa.gov

Cancel

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HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

Home Covered Entities Contract Pharmacies Manufacturers Reports

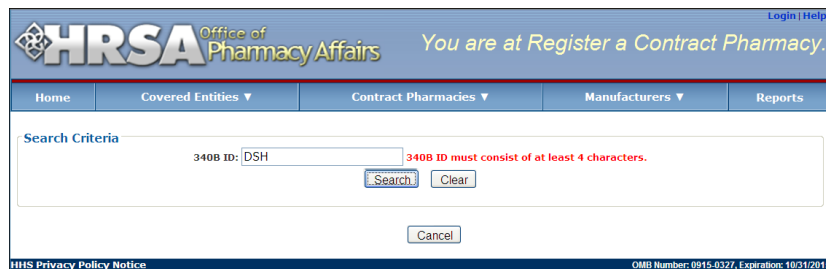
Search Criteria

340B ID: dsh2100

Search Clear

Cancel

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HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

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Search Criteria

340B ID: DSH 340B ID must consist of at least 4 characters.

Search Clear

Cancel

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REGISTERING A CONTRACT PHARMACY

DETAILS

- Clicking the **Cancel** button displays a pop-up window throughout the registration process.
- OK** button returns to OPA 340B homepage.
- Cancel** button allows user to continue.

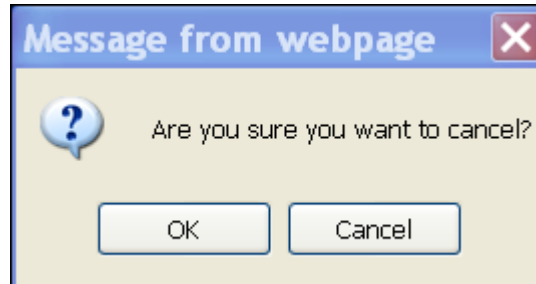
Search Results

- Click on a radio button next to the applicable 340B ID.
- Click the **Continue** button and the **Covered Entity Authorizing Official Verification** screen displays.

- Click the "Yes" radio button to verify that the covered entity authorizing official information is correct.

- Click the **Continue** button.

EXAMPLE



HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

Home Covered Entities Contract Pharmacies Manufacturers Reports

Search Results:
The number of rows returned: 203 Rows/Page: 10 Set Show Search Criteria

340B ID	Entity Type	Entity Name	Sub Name	Address	City	State	Start Date	Term Date	Edit Date
<input type="radio"/> DSH210002	DSH	UNIVERSITY OF MARYLAND MEDICAL CENTER		22 SOUTH GREENE STREET	BALTIMORE	MD	10/01/2001		12/20/2012
<input type="radio"/> DSH210003	DSH	PRINCE GEORGE'S HOSPITAL CENTER		3001 HOSPITAL DRIVE	CHEVERLY	MD	10/01/2002		05/29/2012
<input type="radio"/> DSH210003A	DSH	PRINCE GEORGE'S HOSPITAL CENTER	BOWIE HEALTH CENTER	15001 HEALTH CENTER DRIVE	BOWIE	MD	07/01/2005		05/29/2012
<input type="radio"/> DSH210004	DSH	HOLY CROSS HOSPITAL		1500 FOREST GLEN ROAD	SILVER SPRING	MD	09/02/2008		09/07/2012
<input checked="" type="radio"/> DSH210008	DSH	MERCY MEDICAL CENTER		301 ST. PAUL PLACE	BALTIMORE	MD	10/01/2002		03/18/2013
<input type="radio"/> DSH210009	DSH	JOHNS HOPKINS HOSPITAL			BALTIMORE	MD	07/01/2002		05/29/2012
<input type="radio"/> DSH210009AA	DSH	JOHNS HOPKINS HOSPITAL	NRO-Hydrocephalus	601 N. Caroline Street	Baltimore	MD	01/01/2013		12/20/2012
<input type="radio"/> DSH210009AB	DSH	JOHNS HOPKINS HOSPITAL	NRO-Peripheral Nerve	601 N. Caroline Street	Baltimore	MD	01/01/2013		12/20/2012
<input type="radio"/> DSH210009AC	DSH	JOHNS HOPKINS HOSPITAL	NRO-Stroke Prevention	601 N. Caroline Street	Baltimore	MD	01/01/2013		12/20/2012
<input type="radio"/> DSH210009AD	DSH	JOHNS HOPKINS HOSPITAL	Lumbar Puncture	601 N. Caroline Street	Baltimore	MD	01/01/2013		12/20/2012

1 2 3 4 5 6 7 8 9 10 ...

Continue Cancel

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HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

Home Covered Entities Contract Pharmacies Manufacturers Reports

Covered Entity Authorizing Official Verification

340B ID	Entity Type	Entity Name	Sub Name	Address	City	State	Start Date	Term Date	Edit Date
<input checked="" type="radio"/> DSH210008	DSH	MERCY MEDICAL CENTER		301 ST. PAUL PLACE	BALTIMORE	MD	10/1/2002		3/18/2013

Is the authorizing official information correct for the selected covered entity? ☒ Yes ☐ No

The Authorizing Official for the covered entity will receive a separate email with instructions on how to certify the contract pharmacy arrangement(s) you are about to register.

CE Authorizing Official

Name: JOHN TOPPER
Title: CFO
Phone: 410-332-9313 Ext:

Continue Cancel

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REGISTERING A CONTRACT PHARMACY

DETAILS

- Answering "No", that the authorizing official information is incorrect, automatically discontinues the registration process.

Request to Terminate Pharmacy

- When no other contract pharmacy arrangements exist for the selected covered entity, the **Request Contract Terminations** screens are omitted from the registration process.
- When the covered entity has existing contract pharmacy arrangements, the options are:
 - Request to terminate an existing contract, or
 - Decline submitting request to terminate an existing contract.

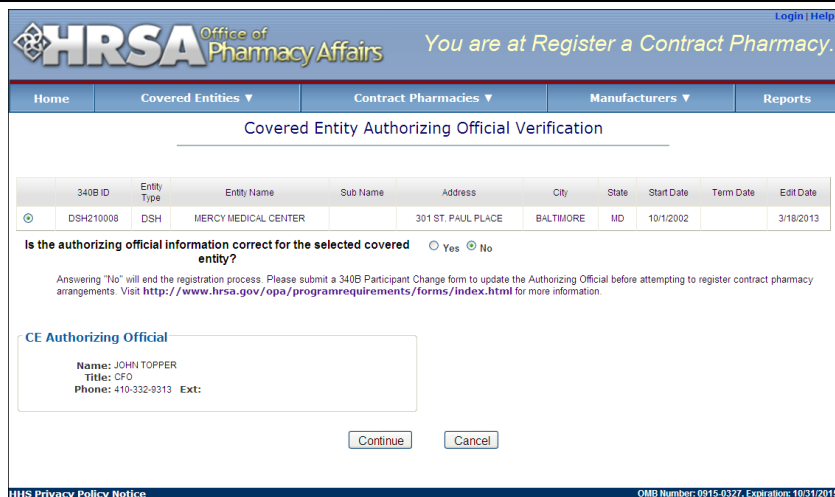
- Select the applicable radio button.



For this registration, no contract termination request is indicated, and the contract pharmacy registration process continues.

- Click the **Continue** button and the **Pharmacy Search** screen displays.

EXAMPLE




REGISTERING A CONTRACT PHARMACY

DETAILS

Pharmacy Search

- Pharmacy search can be done:
 - by DEA Number, or
 - by Pharmacy Name, City, State, and Zip.
- If the pharmacy will never have a DEA certification because the pharmacy does not dispense controlled substances, click on the OPA link for assistance: 340bcontractpharmacy@hrsa.gov

DEA Number Search

- Enter DEA number.
 - Pharmacy Search** screen displays a grid at the top of the screen with the selected covered entity information.
 - DEA Numbers are validated through U.S. Drug Enforcement Agency.
 - If a DEA number has not been assigned to the applicable pharmacy, then the registration cannot be completed.
 - DEA Number consists of nine (9) characters and must be an exact match.
 - Using DEA number omits the **Pharmacy Search Results table** because it is specific to a single pharmacy.
2. Click the Search button and the **Contract Details** screen displays.

EXAMPLE



HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

Home Covered Entities Contract Pharmacies Manufacturers Reports

340B ID	Entity Type	Entity Name	Sub Name	Address	City	State	Start Date	Term Date	Edit Date
DSH21008	DSH	MERCY MEDICAL CENTER		301 ST. PAUL PLACE	BALTIMORE	MD	10/1/2002		5/15/2012

Search Criteria
Pharmacy selection-- The 340B database relies on information received from the U.S. Drug Enforcement Administration (DEA); you may search for pharmacies by DEA number, name, city, state or zip code.

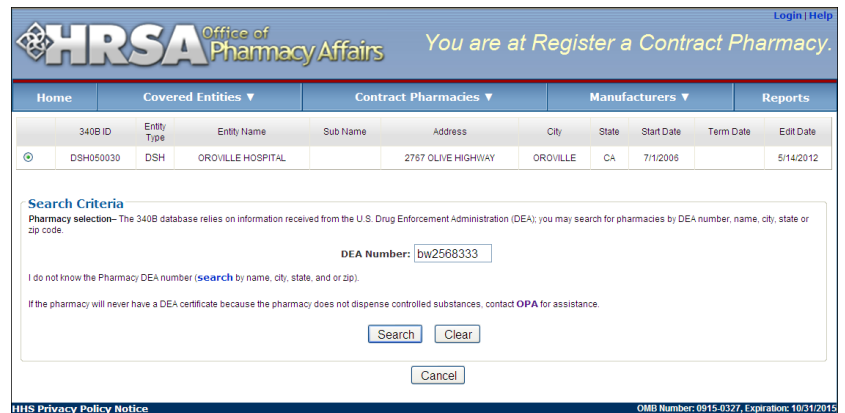
DEA Number:

I do not know the Pharmacy DEA number (search by name, city, state, and/or zip).

If the pharmacy will never have a DEA certificate because the pharmacy does not dispense controlled substances, contact OPA for assistance.

Search Clear Cancel

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HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

Home Covered Entities Contract Pharmacies Manufacturers Reports

340B ID	Entity Type	Entity Name	Sub Name	Address	City	State	Start Date	Term Date	Edit Date
DSH050030	DSH	OROVILLE HOSPITAL		2767 OLIVE HIGHWAY	OROVILLE	CA	7/1/2006		5/14/2012

Search Criteria
Pharmacy selection-- The 340B database relies on information received from the U.S. Drug Enforcement Administration (DEA); you may search for pharmacies by DEA number, name, city, state or zip code.

DEA Number:

I do not know the Pharmacy DEA number (search by name, city, state, and/or zip).

If the pharmacy will never have a DEA certificate because the pharmacy does not dispense controlled substances, contact OPA for assistance.

Search Clear Cancel

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REGISTERING A CONTRACT PHARMACY

DETAILS

DEA Number Error Messages

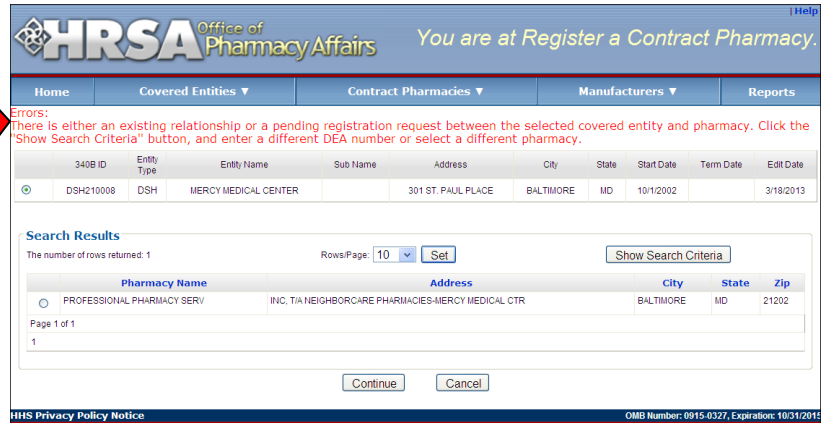
- Error message displays when entering a DEA Number for a contract pharmacy that has an existing or pending relationship with the covered entity.
- Select the **Show Search Criteria** to enter a different DEA Number.

- An error message displays when a partial number or an incorrect number is entered.

Pharmacy Search

- If the DEA number is unknown, select the search link and the screen expands.
- Pharmacy search fields are pharmacy name, city, state, and zip, and all are validated against DEA Number data.

EXAMPLE



HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

Home Covered Entities Contract Pharmacies Manufacturers Reports

Errors:
There is either an existing relationship or a pending registration request between the selected covered entity and pharmacy. Click the "Show Search Criteria" button, and enter a different DEA number or select a different pharmacy.

340B ID	Entity Type	Entity Name	Sub Name	Address	City	State	Start Date	Term Date	Edit Date
DSH210008	DSH	MERCY MEDICAL CENTER		301 ST. PAUL PLACE	BALTIMORE	MD	10/1/2002		3/18/2013

Search Results
The number of rows returned: 1 Rows/Page: 10 Set Show Search Criteria

Pharmacy Name	Address	City	State	Zip
PROFESSIONAL PHARMACY SERV	INC. TIA NEIGHBORCARE PHARMACIES-MERCY MEDICAL CTR	BALTIMORE	MD	21202

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1

Continue Cancel

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HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

Home Covered Entities Contract Pharmacies Manufacturers Reports

Errors:
A DEA number consists of 9 characters. Only an exact match will be returned.

340B ID	Entity Type	Entity Name	Sub Name	Address	City	State	Start Date	Term Date	Edit Date
DSH210008	DSH	MERCY MEDICAL CENTER		301 ST. PAUL PLACE	BALTIMORE	MD	10/1/2002		3/18/2013

Search Criteria
Pharmacy selection- The 340B database relies on information received from the U.S. Drug Enforcement Administration (DEA); you may search for pharmacies by DEA number, name, city, state or zip code.

DEA Number: BW6

I do not know the Pharmacy DEA number (search by name, city, state, and/or zip).

If the pharmacy will never have a DEA certificate because the pharmacy does not dispense controlled substances, contact OPA for assistance.

Search Clear

Cancel

HHS Privacy Policy Notice OMB Number: 0915-0327, Expiration: 10/31/2015



HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

Home Covered Entities Contract Pharmacies Manufacturers Reports

340B ID	Entity Type	Entity Name	Sub Name	Address	City	State	Start Date	Term Date	Edit Date
DSH210008	DSH	MERCY MEDICAL CENTER		301 ST. PAUL PLACE	BALTIMORE	MD	10/1/2002		3/18/2013

Search Criteria
Pharmacy selection- The 340B database relies on information received from the U.S. Drug Enforcement Administration (DEA); you may search for pharmacies by DEA number, name, city, state or zip code.

Pharmacy Name:

Pharmacy City:

Pharmacy State:

Pharmacy Zip:

If the pharmacy will never have a DEA certificate because the pharmacy does not dispense controlled substances, contact OPA for assistance.

Search Clear

Cancel

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REGISTERING A CONTRACT PHARMACY

DETAILS

1. Enter search criteria in applicable fields. The more data entered the narrower the search results.

2. Click the **Search** button and the **Pharmacy Search Results** table displays.

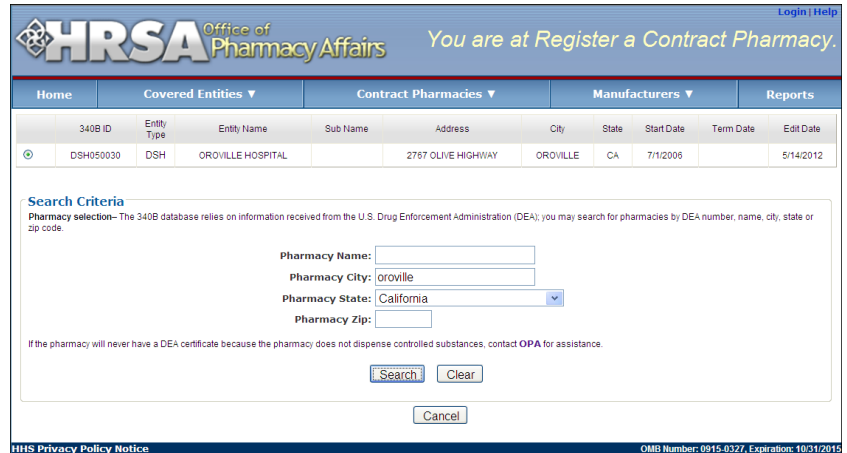


With an exact match to the search criteria, the Search Results table is omitted, and the Contract Details screen displays.

Pharmacy Search Results

1. Select a radio button for the applicable pharmacy.
2. Click the **Continue** button and the Contract Details screen displays.

EXAMPLE



HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

Home Covered Entities Contract Pharmacies Manufacturers Reports

340B ID	Entity Type	Entity Name	Sub Name	Address	City	State	Start Date	Term Date	Edit Date
DSH050030	DSH	OROVILLE HOSPITAL		2767 OLIVE HIGHWAY	OROVILLE	CA	7/1/2006		5/14/2012

Search Criteria

Pharmacy selection- The 340B database relies on information received from the U.S. Drug Enforcement Administration (DEA); you may search for pharmacies by DEA number, name, city, state or zip code.

Pharmacy Name:

Pharmacy City:

Pharmacy State:

Pharmacy Zip:

If the pharmacy will never have a DEA certificate because the pharmacy does not dispense controlled substances, contact OPA for assistance.

Search **Clear** **Cancel**

HHS Privacy Policy Notice OMB Number: 0915-0327, Expiration: 10/31/2015



HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

Home Covered Entities Contract Pharmacies Manufacturers Reports

340B ID	Entity Type	Entity Name	Sub Name	Address	City	State	Start Date	Term Date	Edit Date
DSH210008	DSH	MERCY MEDICAL CENTER		301 ST. PAUL PLACE	BALTIMORE	MD	10/1/2002		3/18/2013

Search Results

The number of rows returned: 209 Rows/Page: 10 **Set** **Show Search Criteria**

Pharmacy Name	Address	City	State	Zip
<input type="radio"/> ABH PHARMACY & MED SUPPLIES	219 S COLLINS AVE	BALTIMORE	MD	21229
<input type="radio"/> ADVANCED PHARMACY	BLUE POINT UNRSING & REHABILITATION CENT 2525 WEST BELVEDERE AVENUE	BALTIMORE	MD	21215
<input type="radio"/> AMENDRX AT NORTHERN PHARMACY	6701 HARFORD RD	BALTIMORE	MD	21234
<input type="radio"/> AMERICAN SALES COMPANY	7110 AMBASSADOR ROAD	BALTIMORE	MD	21244
<input type="radio"/> B I L INC	STATE PHARMACY	BALTIMORE	MD	21234
<input type="radio"/> BALA VIRISAAR PHARMACY INC, DBA FREEDOM	7568 NORTH POINT ROAD	BALTIMORE	MD	21219
<input type="radio"/> BALTIMORE AMBULATORY CENTER	FOR ENDOSCOPY 19 FONTANA LANE	BALTIMORE	MD	21237
<input type="radio"/> BALTIMORE CITY DETENTION CENTER	MENS DETENTION CENTER 401 EAST EAGER STREET	BALTIMORE	MD	21212
<input type="radio"/> BALTIMORE CITY DETENTION CENTER	WOMENS DETENTION CENTER 401 EAST EAGER STREET	BALTIMORE	MD	21212
<input type="radio"/> BALTIMORE CITY JUVENILE JUSTICE CENTER	ATTENTION: MEDICAL DEPARTMENT 300 NORTH GAY STREET	BALTIMORE	MD	21202

Page 1 of 30
1 2 3 4 5 6 7 8 9 10 ...

Continue **Cancel**

HHS Privacy Policy Notice OMB Number: 0915-0327, Expiration: 10/31/2015

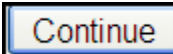
REGISTERING A CONTRACT PHARMACY

DETAILS

Contract Details

- **Contract Details** provides read-only sections for:
 - Covered Entity Details
 - Covered Entity Authorizing Official
 - Contract Pharmacy Details
- **Requested Contract Begin Date:**
 - Date is set in accordance with the registration period guidelines, typically first day of the next quarter.
 - Contract pharmacy start date may not precede the registration date of the covered entity. For example, an organization added as a covered entity for the April 1, 2013 quarter may not have a contract pharmacy start date prior to April 1, 2013.
- Contract pharmacy cannot be registered when a covered entity is pending review and approval from OPA.

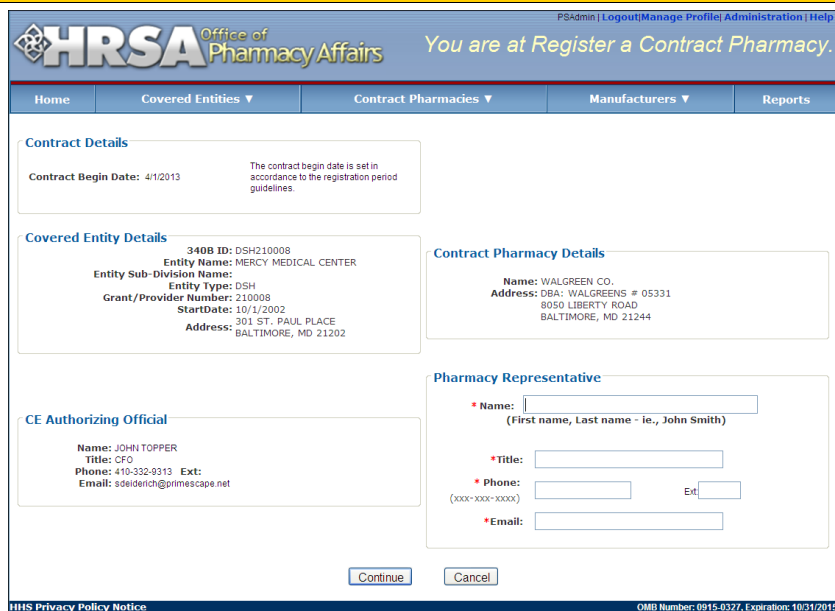
Entering Pharmacy Rep Info

- Pharmacy Representative section is blank, and all fields with an asterisk (*) must be entered.
1. Enter information in fields.
 2. Click the  button and the **Contract Details Summary** screen displays.



When registering multiple contract pharmacies for the same covered entity, the pharmacy representative fields are maintained from the last entry made. If pharmacy representative is the same, no edits are required.

EXAMPLE



HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

PSAdmin | Logout | Manage Profile | Administration | Help

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

Contract Details

Contract Begin Date: 4/1/2013 The contract begin date is set in accordance to the registration period guidelines.

Covered Entity Details

340B ID: DSH210008
Entity Name: MERCY MEDICAL CENTER
Entity Sub-Division Name:
Entity Type: DSH
Grant/Provider Number: 210008
StartDate: 10/1/2002
Address: 301 ST. PAUL PLACE
BALTIMORE, MD 21202

Contract Pharmacy Details

Name: WALGREEN CO.
Address: DBA: WALGREENS # 05331
8050 LIBERTY ROAD
BALTIMORE, MD 21244

CE Authorizing Official

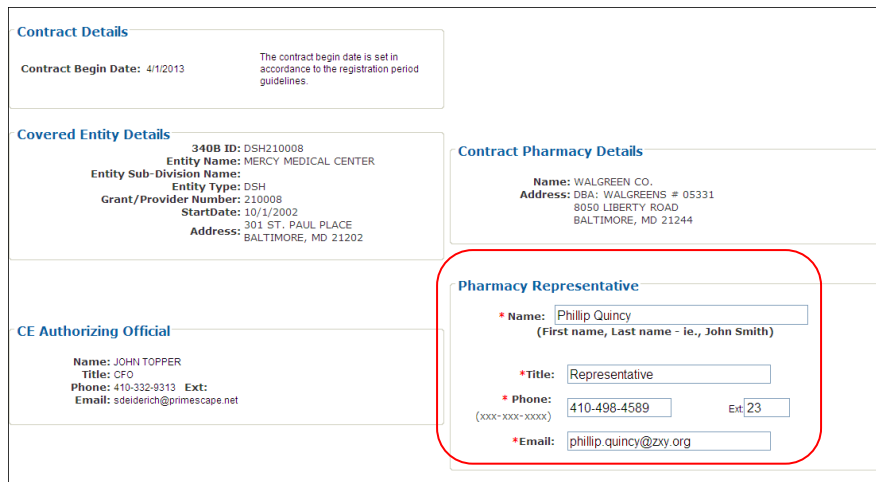
Name: JOHN TOPPER
Title: CFO
Phone: 410-332-9313 Ext:
Email: sdeiderich@primescape.net

Pharmacy Representative

* Name: (First name, Last name - ie., John Smith)
* Title:
* Phone: (xxx-xxx-xxxx) Ext:
* Email:

Continue Cancel

HRSA Privacy Policy Notice OMB Number: 0915-0327, Expiration: 10/31/2015



Contract Details

Contract Begin Date: 4/1/2013 The contract begin date is set in accordance to the registration period guidelines.

Covered Entity Details

340B ID: DSH210008
Entity Name: MERCY MEDICAL CENTER
Entity Sub-Division Name:
Entity Type: DSH
Grant/Provider Number: 210008
StartDate: 10/1/2002
Address: 301 ST. PAUL PLACE
BALTIMORE, MD 21202

Contract Pharmacy Details

Name: WALGREEN CO.
Address: DBA: WALGREENS # 05331
8050 LIBERTY ROAD
BALTIMORE, MD 21244

CE Authorizing Official

Name: JOHN TOPPER
Title: CFO
Phone: 410-332-9313 Ext:
Email: sdeiderich@primescape.net

Pharmacy Representative

* Name: Phillip Quincy (First name, Last name - ie., John Smith)
* Title: Representative
* Phone: 410-498-4589 Ext: 23
* Email: phillip.quincy@zvy.org

REGISTERING A CONTRACT PHARMACY	
DETAILS	EXAMPLE
<p>Existing Pharmacy Rep Info</p> <ul style="list-style-type: none"> System maintains contract pharmacy representative data. When entering information in the Name field, one or more names may display for selection. <ol style="list-style-type: none"> Begin typing in the “Name” field. Select applicable name from drop-down list and system pre-populates remaining data 	<div data-bbox="743 394 1442 760"> <p>Pharmacy Representative</p> <p>* Name: <input type="text" value="k"/> (Fill Karl Meehan</p> <p>* Title: <input type="text"/></p> <p>* Phone: <input type="text"/> * Ext: <input type="text"/> (XXX-XXX-XXXX)</p> <p>* Email: <input type="text"/></p> </div> <div data-bbox="743 772 1442 1003"> <p>Pharmacy Representative</p> <p>* Name: <input type="text" value="Karl Meehan"/> (First name, Last name - ie., John Smith)</p> <p>Title: Vice President, Health Systems Programs Phone: 847-315-2663</p> </div>

REGISTERING A CONTRACT PHARMACY

DETAILS

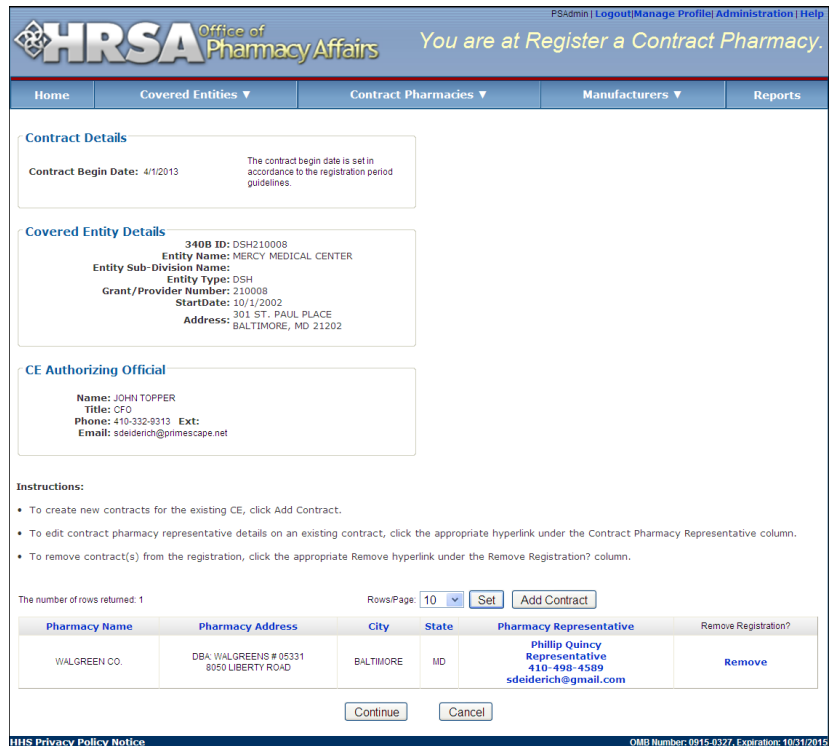
Contract Details Summary

- **Contract Details Summary** screen provides ability to:
 - Review information for each contract pharmacy registration request.
 - Add additional contract pharmacies during same registration process for the same covered entity.
 - Remove contract registrations.
 - Add additional contract pharmacies during same registration process for the same covered entity.
 - Update Contract Pharmacy Representative information.

Adding Additional Contract Pharmacies

1. Click the **Add Contract** button and the **Pharmacy Search** screen displays.
2. Enter DEA number or other search criteria.
3. Click the **Search** button and the based on search criteria entered either the **Contract Details** screen or **Pharmacy Search Results** table displays.

EXAMPLE



Contract Details

Contract Begin Date: 4/1/2013

Covered Entity Details

340B ID: DSH210008
 Entity Name: MERCY MEDICAL CENTER
 Entity Sub-Division Name:
 Entity Type: DSH
 Grant/Provider Number: 210008
 Start Date: 10/1/2002
 Address: 301 ST. PAUL PLACE
 Address: BALTIMORE, MD 21202

CE Authorizing Official

Name: JOHN TOPPER
 Title: CFO
 Phone: 410-332-9313 Ext:
 Email: sdeiderich@primescape.net

Instructions:

- To create new contracts for the existing CE, click Add Contract.
- To edit contract pharmacy representative details on an existing contract, click the appropriate hyperlink under the Contract Pharmacy Representative column.
- To remove contract(s) from the registration, click the appropriate Remove hyperlink under the Remove Registration? column.

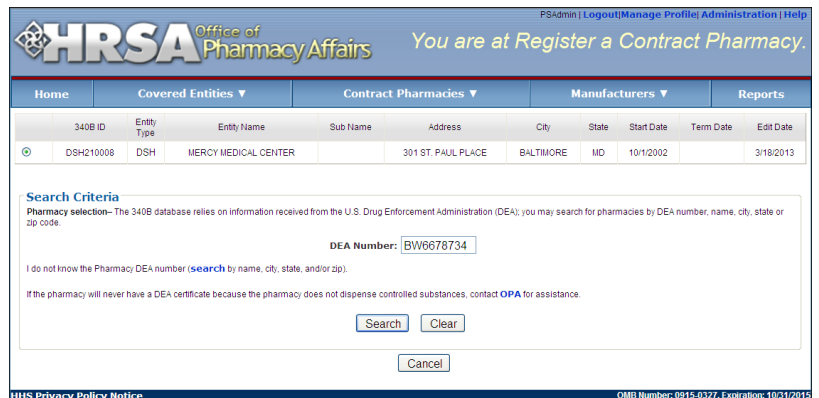
The number of rows returned: 1

Rows/Page: 10 Set Add Contract

Pharmacy Name	Pharmacy Address	City	State	Pharmacy Representative	Remove Registration?
WALGREEN CO.	DBA: WALGREENS # 05331 8050 LIBERTY ROAD	BALTIMORE	MD	Phillip Quincy Representative 410-498-4589 sdeiderich@gmail.com	Remove

Continue Cancel

HHS Privacy Policy Notice OMB Number: 0915-0327, Expiration: 10/31/2015



Pharmacy Search

340B ID	Entity Type	Entity Name	Sub Name	Address	City	State	Start Date	Term Date	Edit Date
DSH210008	DSH	MERCY MEDICAL CENTER		301 ST. PAUL PLACE	BALTIMORE	MD	10/1/2002		3/18/2013

Search Criteria

Pharmacy selection--The 340B database relies on information received from the U.S. Drug Enforcement Administration (DEA); you may search for pharmacies by DEA number, name, city, state or zip code.

DEA Number: BW6678734

I do not know the Pharmacy DEA number (search by name, city, state, and/or zip).

If the pharmacy will never have a DEA certificate because the pharmacy does not dispense controlled substances, contact OPA for assistance.

Search Clear Cancel

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REGISTERING A CONTRACT PHARMACY

DETAILS

Contract Details Screen

1. Enter information in the Pharmacy Representative fields.
2. Click the **Continue** button and the **Contract Details Summary** screen displays.

Removing a Pharmacy

1. Click on the **Remove** button next to the applicable pharmacy link to remove a pharmacy, and a warning pop-up window displays.

EXAMPLE



HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

PSAdmin | Logout | Manage Profile | Administration | Help

Home Covered Entities Contract Pharmacies Manufacturers Reports

Contract Details

Contract Begin Date: 4/1/2013 The contract begin date is set in accordance to the registration period guidelines.

Covered Entity Details

340B ID: DSH210008
Entity Name: MERCY MEDICAL CENTER
Entity Sub-Division Name:
Entity Type: DSH
Grant/Provider Number: 210008
StartDate: 10/1/2002
Address: 301 ST. PAUL PLACE
BALTIMORE, MD 21202

Contract Pharmacy Details

Name: WALGREEN CO.
Address: DBA: WALGREENS # 05409
4020 EASTERN AVENUE
BALTIMORE, MD 21224

CE Authorizing Official

Name: JOHN TOPPER
Title: CFO
Phone: 410-332-9313 Ext:
Email: sdeinderh@primescape.net

Pharmacy Representative

* Name: Phillip Quincy
(First name, Last name - ie., John Smith)

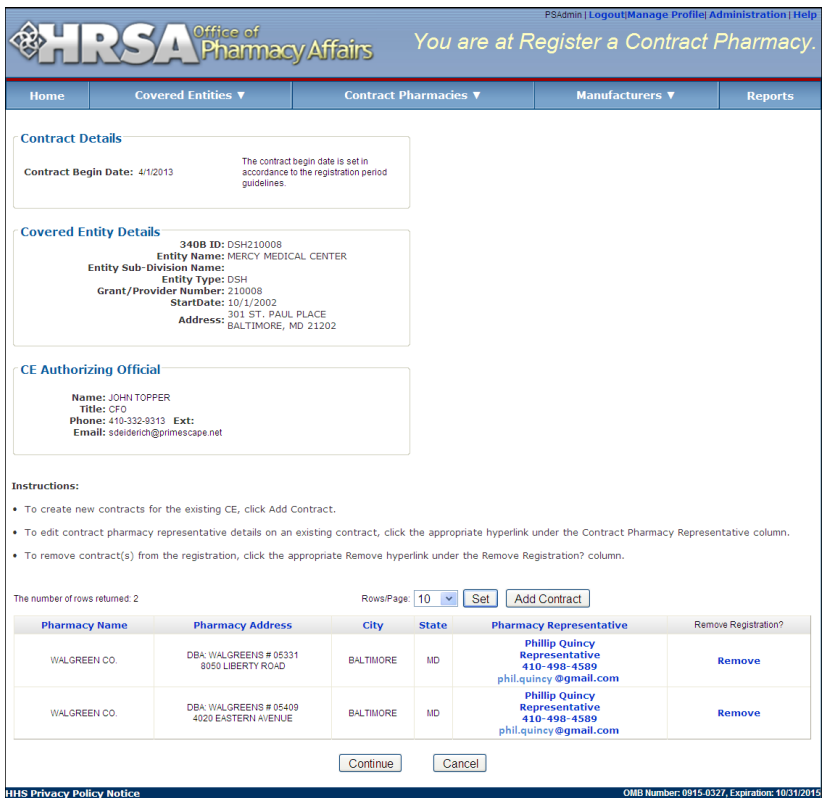
* Title: Representative

* Phone: 410-498-4589 Ext: 23
(xxx-xxx-xxxx)

* Email: phil.quincy@gmail.com

Continue Cancel

HHS Privacy Policy Notice OMB Number: 0915-0327, Expiration: 10/31/2015



HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

PSAdmin | Logout | Manage Profile | Administration | Help

Home Covered Entities Contract Pharmacies Manufacturers Reports

Contract Details

Contract Begin Date: 4/1/2013 The contract begin date is set in accordance to the registration period guidelines.

Covered Entity Details

340B ID: DSH210008
Entity Name: MERCY MEDICAL CENTER
Entity Sub-Division Name:
Entity Type: DSH
Grant/Provider Number: 210008
StartDate: 10/1/2002
Address: 301 ST. PAUL PLACE
BALTIMORE, MD 21202

CE Authorizing Official

Name: JOHN TOPPER
Title: CFO
Phone: 410-332-9313 Ext:
Email: sdeinderh@primescape.net

Instructions:

- To create new contracts for the existing CE, click Add Contract.
- To edit contract pharmacy representative details on an existing contract, click the appropriate hyperlink under the Contract Pharmacy Representative column.
- To remove contract(s) from the registration, click the appropriate Remove hyperlink under the Remove Registration? column.

The number of rows returned: 2 Rows/Page: 10 Set Add Contract



Pharmacy Name	Pharmacy Address	City	State	Pharmacy Representative	Remove Registration?
WALGREEN CO.	DBA: WALGREENS # 05331 8050 LIBERTY ROAD	BALTIMORE	MD	Phillip Quincy Representative 410-498-4589 phil.quincy@gmail.com	Remove
WALGREEN CO.	DBA: WALGREENS # 05409 4020 EASTERN AVENUE	BALTIMORE	MD	Phillip Quincy Representative 410-498-4589 phil.quincy@gmail.com	Remove

Continue Cancel

HHS Privacy Policy Notice OMB Number: 0915-0327, Expiration: 10/31/2015

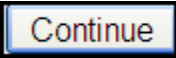
REGISTERING A CONTRACT PHARMACY

DETAILS

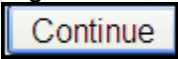
- Click  button and the pharmacy is removed from the table.
-  button cancels the action to remove the pharmacy.

Updating Contract Pharmacy Representative Info

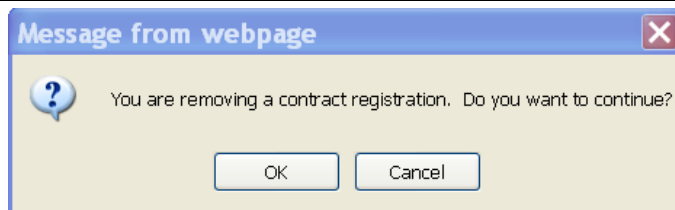
- Click on pharmacy representative and **Contract Details** displays.
- Make changes pharmacy representative's information.

- Click  button and the pharmacy rep's information is updated.

Completing Registration

- When you are finished entering all pharmacies for this registration, click the  button and the **Authorize and Submit** screen displays.

EXAMPLE



Pharmacy Name	Pharmacy Address	City	State	Pharmacy Representative	Remove Registration?
MARYLAND CVS PHARMACY, L.L.C.	DBA: CVS/PHARMACY # 05764 2550 WEST FRANKLIN STREET	BALTIMORE	MD	Jane Snow Representative 456-234-8989 jane.snow@abc.com	


Pharmacy Representative

* Name:
(First name, Last name - ie., John Smith)

* Title:

* Phone: Ext:
(xxx-xxx-xxxx)

* Email:

Pharmacy Name	Pharmacy Address	City	State	Pharmacy Representative	Remove Registration?
MARYLAND CVS PHARMACY, L.L.C.	DBA: CVS/PHARMACY # 05764 2550 WEST FRANKLIN STREET	BALTIMORE	MD	Jane Johnson Representative 456-234-8989 jane.johnson@abc.com	

HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.

PSadm | Logout | Manage Profile | Administration | Help

Home	Covered Entities ▼	Contract Pharmacies ▼	Manufacturers ▼	Reports	
Contract Details Contract Begin Date: 4/1/2013 <small>The contract begin date is set in accordance to the registration period guidelines.</small>					
Covered Entity Details 340B ID: DSH210008 Entity Name: MERCY MEDICAL CENTER Entity Sub-Division Name: Entity Type: DSH Grant/Provider Number: 210008 Start Date: 10/1/2002 Address: 301 ST. PAUL PLACE BALTIMORE, MD 21202					
CE Authorizing Official Name: JOHN TOPPER Title: CFO Phone: 410-332-9313 Ext: Email: zeddenh@comcast.net					
Instructions: <ul style="list-style-type: none"> To create new contracts for the existing CE, click Add Contract. To edit contract pharmacy representative details on an existing contract, click the appropriate hyperlink under the Contract Pharmacy Representative column. To remove contract(s) from the registration, click the appropriate Remove hyperlink under the Remove Registration? column. 					
The number of rows returned: 2 Rows/Page: 10 Set Add Contract					
Pharmacy Name	Pharmacy Address	City	State	Pharmacy Representative	Remove Registration?
WALGREEN CO.	DBA: WALGREENS # 05331 8000 LIBERTY ROAD	BALTIMORE	MD	Phillip Quincy Representative 410-498-4589 phil.quincy@gmail.com	
WALGREEN CO.	DBA: WALGREENS # 05409 4509 EASTERN AVENUE	BALTIMORE	MD	Phillip Quincy Representative 410-498-4589 phil.quincy@gmail.com	
Continue Cancel					

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REGISTERING A CONTRACT PHARMACY

DETAILS

Authorizing and Submitting

1. Click the checkbox next to the statement, a required field.
2. Enter information in the Requestor contact fields.
3. Enter a remark, an optional field.
4. Click the **Authorize and Submit** button and the Confirmation screen displays.



Email notifications are sent after validation is completed on this screen.

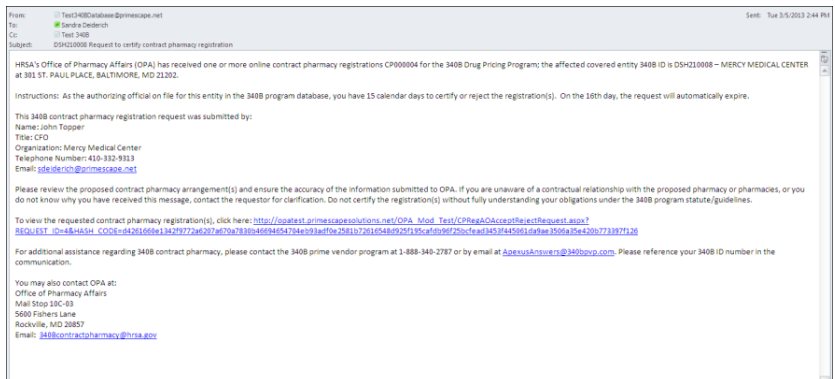
5. Click the **Done** button and return to the **OPA 340B Homepage**.

Email Notifications

- Email notifications are systematically sent when validation is completed.
- Authorizing Official verify email notification is sent to:
 - Authorizing Official for covered entity with embedded link to approve/reject registration requests.
 - Email provides Requestor contact information.

EXAMPLE





REGISTERING A CONTRACT PHARMACY	
DETAILS	EXAMPLE
<ul style="list-style-type: none"> Requestor email notification is sent to: <ul style="list-style-type: none"> Requestor (person submitting registration) if different from Authorizing Official Included CC's are: <ul style="list-style-type: none"> Primary contact for the covered entity Contract Pharmacy Representative 	<div> <p>From: "Test340BDatabase@hrsa.gov"</p> <p>Date: Tue, Mar 5, 2013 at 2:01 PM</p> <p>Subject: DSH210008 Confirmation of contract pharmacy registration request</p> <p>To: rfd@denich.com</p> <p>Cc: Test340BDatabase@hrsa.gov</p> <p>HRSA's Office of Pharmacy Affairs (OPA) has received one or more online contract pharmacy registrations CP000004 for the 340B Drug Pricing program; the affected covered entity 340B ID is DSH210008 – MERCY MEDICAL CENTER at 301 ST. PAUL PLACE, BALTIMORE, MD 21202.</p> <p>IMPORTANT -- Registrations expire on the 16th calendar day after entry if not reviewed by the covered entity's authorizing official, as listed in the 340B program database. The authorizing official will receive a separate email with detailed instructions for certifying or rejecting the registration.</p> <p>The following contract pharmacy arrangements have been entered and are pending certification by the authorizing official as well as approval by OPA:</p> <p>WAL-MART PHARMACY 10-1575, 355 ORO DAM BLVD, OROVILLE, CA 95965.</p> <p>If the entity's authorizing official did not receive the verification email, verify that his or her contact information is correct in the 340B database. If the authorizing official listed in the database is incorrect, you must first submit a manual change request form with the new official's name and contact information.</p> <p>Please adjust your spam or junk filters to allow successful delivery of e-mails from hrsa.gov. OPA will not be responsible for lost deleted emails. If there are any errors in a registration, ask the authorizing official to reject the proposed changes and submit a new request with the correct data.</p> <p>Contact us if the above troubleshooting tips are unsuccessful. Please reference your 340B ID number in any communication with OPA.</p> <p>Office of Pharmacy Affairs 5600 Fishery Lane, Mail Stop 10C-03 Rockville, MD 20857 Email: 340Bcontractpharmacy@hrsa.gov</p> </div>

APPROVE / REJECT CONTRACT PHARMACY REGISTRATION REQUESTS

Objectives:

- Reviewing Contract Pharmacy Registration Requests
- Approving/Rejecting Contract Pharmacy Registration Requests

AO APPROVE / REJECT PHARMACIES

Helpful Tips for Authorizing Official



The authorizing official is responsible for approving or rejecting each contract pharmacy registration request.

The authorizing official accesses pharmacy requests using the embedded link provided in the email verification notification.

The authorizing official has 15 calendar days to approve or reject each contract pharmacy registration request.

When the authorizing official does not approve or reject registration request within 15 calendar days, on calendar day 16, the contract pharmacy submission is automatically “expired” by the system.

AO APPROVE / REJECT PHARMACIES	
DETAILS	EXAMPLE

Approving or Rejecting Pharmacy Submissions

1. Click on embedded link in email and the **Authorizing Official Approve/Reject** screen displays.



The authorizing official has access to the Verification screen until the 15-calendar days have passed. All the pharmacies are approved or rejected by clicking on the embedded link in the email.

- Each contract pharmacy submission request is assigned a unique Request Number (i.e., CP000004).
- Contract pharmacies are initially assigned status of "Submitted".
- Status updates are:
 - **Approve:** contract pharmacy submission is "AO Approved" to participate in the 340B Drug Program with the covered entity.
 - **Reject:** contract pharmacy is "AO Rejected" and is not approved to participate in the 340B Drug Program with the covered entity.
- Select All checkbox allows authorizing official to select all pharmacies in the table and then click the "Approve" or "Reject" button to update the status for all.
- Once a contract pharmacy is approved or rejected, there is no option to change the status.

From: Test340BDatabase@hrsa.gov
To: @sandra@hrsa.gov
Cc: Test 340B
Subject: DSH210008 Request to certify contract pharmacy registration

HRSA's Office of Pharmacy Affairs (OPA) has received one or more online contract pharmacy registrations CP000004 for the 340B Drug Pricing Program; the affected covered entity 340B ID is DSH210008 - MERCY MEDICAL CENTER at 301 ST. PAUL PLACE, BALTIMORE, MD 21202.

Instructions: As the authorizing official on file for this entity in the 340B program database, you have 15 calendar days to certify or reject the registration(s). On the 16th day, the request will automatically expire.

This 340B contract pharmacy registration request was submitted by:
Name: John Topper
Title: CFO
Organization: Mercy Medical Center
Telephone Number: 410-332-9313
Email: jtopper@mercy.org

Please review the proposed contract pharmacy arrangement(s) and ensure the accuracy of the information submitted to OPA. If you are unaware of a contractual relationship with the proposed pharmacy or pharmacies, or you do not know why you have received this message, contact the requestor for clarification. Do not certify the registration(s) without fully understanding your obligations under the 340B program statute/guidelines.

To view the requested contract pharmacy registration(s), click here: http://opatest.apexanswersolutions.net/OPA_Mod_Test/CPHeadAOApproveRejectRequest.aspx?RequestID=CP000004&RequestNumber=DSH210008

For additional assistance regarding 340B contract pharmacy, please contact the 340B prime vendor program at 1-888-340-2787 or by email at ApexAnswers@340bvp.com. Please reference your 340B ID number in the communication.

You may also contact OPA at:
Office of Pharmacy Affairs
Mail Stop 10C-03
5600 Fishers Lane
Rockville, MD 20857
Email: 340Bcontractpharmacy@hrsa.gov

PSAdmin | Logout | Manage Profile | Administration | Help

HRSA Office of Pharmacy Affairs

You are at Register a Contract Pharmacy.

Home	Covered Entities ▼	Contract Pharmacies ▼	Manufacturers ▼	Reports
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340B ID: DSH210008 MERCY MEDICAL CENTER
A contract pharmacy registration has been submitted regarding DSH210008 - MERCY MEDICAL CENTER, at 301 ST. PAUL PLACE, BALTIMORE, MD 21202

- All contract pharmacy registrations are available to be "approved" or "rejected" from calendar day 1 through day 15. If you don't act on this, before day 16, any contract pharmacy registrations that have not been approved or rejected, will expire.
- To approve a contract pharmacy registration, click the checkbox next to the applicable pharmacy and then click the "Approve" button.
- To reject a contract pharmacy registration, click the checkbox next to the applicable pharmacy and then click the "Reject" button.

NOTE: Once you have selected a pharmacy and clicked either the "Approve" or "Reject" button, it cannot be changed.

Requestor Details

Name: John Topper
Title: CFO
Organization: Mercy Medical Center
Phone: 410-332-9313 Ext: 5600
Email: jtopper@mercy.org

Request Number: CP000025

Select All	Pharmacy Name	Pharmacy Address	City	State	CP Representative	Request Status
<input type="checkbox"/>	WALGREEN CO.	DBA: WALGREENS # 05409 4020 EASTERN AVENUE	BALTIMORE	MD	Phillip Quincy Representative 410-498-4589 phi.quincy@gmail.com	Submitted
<input type="checkbox"/>	WALGREEN CO.	DBA: WALGREENS # 05331 8050 LIBERTY ROAD	BALTIMORE	MD	Phillip Quincy Representative 410-498-4589 phi.quincy@gmail.com	Submitted

☐ By checking this box, I represent and confirm that I am fully authorized to bind the Covered Entity and the Pharmacy listed, and certify that the contents of any statement made or reflected in this document are truthful and accurate. The Covered Entity and the Pharmacy will comply with all of the requirements and restrictions of Section 340B of the Public Health Service Act and any accompanying regulations or guidelines, including, but not limited to, the prohibitions on duplicate discounts/rebates, and drug diversion. The Covered Entity and the Pharmacy agree to be in compliance with the provisions of the Contract Pharmacy Services Guidelines as set forth in the Federal Register, at 75 Fed. Reg. 10272 (March 5, 2010), which can be found at <http://www.gpo.gov/fdsys/pkg/FR-2010-03-05/pdf/2010-0755.pdf>. The authorizing official certifies on behalf of the covered entity that the contract pharmacy arrangement will be performed in accordance with OPA requirements and guidelines including, but not limited to, that the Covered Entity obtains sufficient information from the contractor to ensure compliance with applicable policy and legal requirements, and the Covered entity has utilized an appropriate methodology to ensure compliance (e.g., through an independent audit or other mechanism). The Covered Entity has, and continues to bear, full responsibility and accountability for compliance with all 340B requirements, including but not limited to any 340B violations by the Contract Pharmacy. The Covered Entity agrees to notify the Office of Pharmacy Affairs, in writing, of any material changes in the contract arrangement and/or material breach by the covered entity of any of the foregoing.

Click the **Approve** button to approve this contract pharmacy registration.

Click the **Reject** button to reject this contract pharmacy registration.

For additional assistance regarding 340B contract pharmacy, please contact the 340B prime vendor program at 1-888-340-2787 or by email at ApexAnswers@340bvp.com. Please reference your 340B ID number in the communication.

You may also contact OPA at:
Office of Pharmacy Affairs
Mail Stop 10C-03
5600 Fishers Lane
Rockville, MD 20857
Email: 340Bcontractpharmacy@hrsa.gov

HRSA Privacy Policy Notice

OMB Number: 0915-0327, Expiration: 10/31/2015

AO APPROVE / REJECT PHARMACIES

DETAILS

- Click the checkbox next to the attestation statement, which states that the authorizing official is authorized to represent the covered entity and pharmacy.



When the attestation checkbox is not selected, an error message displays at the top of the screen.

- Click a checkbox next to the applicable pharmacy name.
or
Click the Select All checkbox to select all pharmacies listed.
- Click the **Reject** or **Approve** button and the status of selected pharmacies are updated to:
 - AO Rejected
 - AO Approved
- Confirmation or rejection email notifications are sent as each Pharmacy submission is updated.

EXAMPLE

Select All	Pharmacy Name	Pharmacy Address	City	State	CP Representative	Request Status
<input checked="" type="checkbox"/>	WALGREEN CO.	DBA: WALGREENS # 05409 4020 EASTERN AVENUE	BALTIMORE	MD	Phillip Quincy Representative 410-499-4599 sdeidenich@gmail.com	Submitted
<input type="checkbox"/>	WALGREEN CO.	DBA: WALGREENS # 05331 8950 LIBERTY ROAD	BALTIMORE	MD	Phillip Quincy Representative 410-499-4599 sdeidenich@gmail.com	Submitted

☒ By checking this box, I represent and confirm that I am fully authorized to bind the Covered Entity and the Pharmacy listed, and certify that the contents of any statement made or reflected in this document are truthful and accurate. The Covered Entity and the Pharmacy will comply with all of the requirements and restrictions of Section 340B of the Public Health Service Act and any accompanying regulations or guidelines, including, but not limited to, the prohibitions on duplicate discounts/rebates, and drug diversion. The Covered Entity and the Pharmacy agree to be in compliance with the provisions of the Contract Pharmacy Services Guidelines as set forth in the Federal Register, at 75 Fed. Reg. 10272 (March 5, 2010), which can be found at <http://www.gpo.gov/fdsys/pkg/FR-2010-03-05/pdf/2010-4755.pdf>. The authorizing official certifies on behalf of the covered entity that the contract pharmacy arrangement will be performed in accordance with OPA requirements and guidelines including, but not limited to, that the Covered Entity obtains sufficient information from the contractor to ensure compliance with applicable policy and legal requirements, and the Covered entity has utilized an appropriate methodology to ensure compliance (e.g., through an independent audit or other mechanism). The Covered Entity has, and continues to bear, full responsibility and accountability for compliance with all 340B requirements, including but not limited to any 340B violations by the Contract Pharmacy. The Covered Entity agrees to notify the Office of Pharmacy Affairs, in writing, of any material changes in the contract arrangement and/or material breach by the covered entity of any of the foregoing.

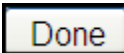
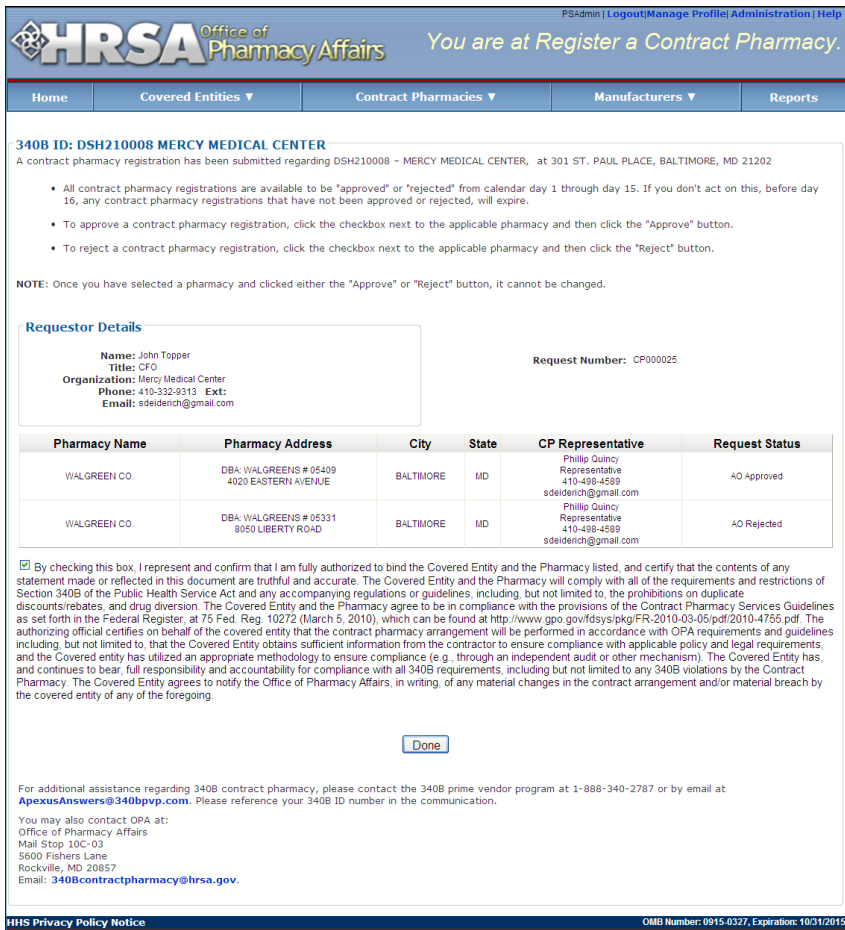
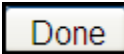

Click the **Approve** button to approve this contract pharmacy registration.

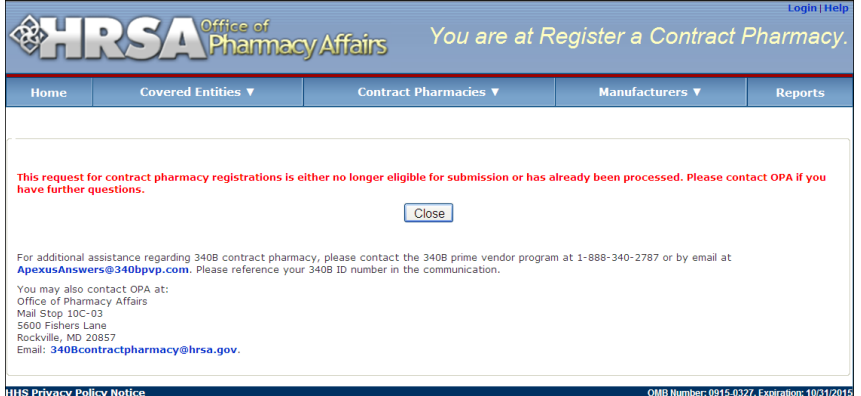
Click the **Reject** button to reject this contract pharmacy registration.

Errors:

You must check the attestation checkbox prior to submission.

Pharmacy Name	Pharmacy Address	City	State	CP Representative	Request Status
FAMILY PHARMACY LLC	7002 REISTERSTOWN RD SUITE F	BALTIMORE	MD	Jane Snow Representative 456-234-9999 jane.snow@xyz.com	AO Approved
WAL-MART PHARMACY 10-1575	355 ORO DAM BLVD	BALTIMORE	MD	Phillip Quincy Representative 321-569-4588 phillip.quincy@zzz.org	AO Rejected

AO APPROVE / REJECT PHARMACIES	
DETAILS	EXAMPLE
<p>Confirming CP Registration</p> <p>5. Click the  button and the Confirmation screen displays.</p>	 <p>The screenshot shows the 'Register a Contract Pharmacy' page. It includes a navigation bar with 'Home', 'Covered Entities', 'Contract Pharmacies', 'Manufacturers', and 'Reports'. The main content area displays the '340B ID: DSH210008 MERCY MEDICAL CENTER' and a list of contract pharmacy registrations. A table lists two registrations for WALGREEN CO. in BALTIMORE, MD. The first registration is 'AO Approved' and the second is 'AO Rejected'. Below the table, there is a 'Requestor Details' section with fields for Name, Title, Organization, Phone, and Email. A 'Done' button is visible at the bottom of the main content area.</p>
<p>6. Click the  button and the OPA 340B Homepage displays.</p>	 <p>The screenshot shows the 'This request has been processed' message. It includes the same navigation bar as the previous screenshot. The main content area displays a large message box with the text 'This request has been processed.' Below the message box, there is a 'Done' button.</p>

AO APPROVE / REJECT PHARMACIES	
DETAILS	EXAMPLE
<p>Pharmacy Request Completed</p> <ul style="list-style-type: none"> When all contract pharmacy registration requests are updated and the authorizing official clicks on the embedded link, this notification screen displays stating: <ul style="list-style-type: none"> pharmacy registration already processed, or is no longer eligible for submission. <p>Email Confirmation</p> <ul style="list-style-type: none"> Authorizing official approves a request, the system generates confirmation email providing: <ul style="list-style-type: none"> Effective date when the pharmacy can participate in the 340B Drug Program. 340B ID of the covered entity. Easy-to-follow instructions to view this information in the OPA 340B System. Email is sent to: <ul style="list-style-type: none"> Requestor Authorizing Official Contract Pharmacy Rep <p>Rejection/Expiration Notification</p> <ul style="list-style-type: none"> Authorizing official rejects or allows a request to expire, the system generates rejection/expire email providing: <ul style="list-style-type: none"> Request number and date of submission. Requestor information. Email is sent to: <ul style="list-style-type: none"> Requestor Authorizing Official Contract Pharmacy Rep 	 <p>HRSA Office of Pharmacy Affairs You are at Register a Contract Pharmacy.</p> <p>Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports</p> <p>This request for contract pharmacy registrations is either no longer eligible for submission or has already been processed. Please contact OPA if you have further questions.</p> <p>Close</p> <p>For additional assistance regarding 340B contract pharmacy, please contact the 340B prime vendor program at 1-888-340-2787 or by email at ApexusAnswers@340bpvp.com. Please reference your 340B ID number in the communication.</p> <p>You may also contact OPA at: Office of Pharmacy Affairs Mail Stop 10C-03 5600 Fishers Lane Rockville, MD 20857 Email: 340Bcontractpharmacy@hrsa.gov.</p> <p>HRSA Privacy Policy Notice OMB Number: 0915-0327, Expiration: 10/31/2015</p> <p>Subject: D5HC2008 340B Contract Pharmacy Confirmation arrangement with FAMILY PHARMACY</p> <p>HRSA's Office of Pharmacy Affairs (OPA) has received a request CP000004 to register a contract pharmacy arrangement between MERCY MEDICAL CENTER at 301 ST. PAUL PLACE, BALTIMORE, MD 21202 and FAMILY PHARMACY LLC at 7082 REISTERSTOWN RD, SUITE F, BALTIMORE MD, MD 21215. The effective date is 4/1/2013.</p> <p>The Covered Entity Authorizing Official and Contract Pharmacy Representative information are listed below:</p> <p>Covered Entity Authorizing Official Information: Name: JOHN TOPPER Title: CFO Telephone Number: 410-332-9313 Email Address: john.topper@fvc.org</p> <p>Covered Pharmacy Representative Information: Name: Jane Snow Title: Representative Telephone Number: 456-234-8989 Email Address: jane.snow@xyz.com</p> <p>This Registration request was submitted by: Name: John Topper Title: CFO Telephone Number: 410-332-9313 Email Address: phillip.guincy@fvc.org</p> <p>Please verify the information on file for the covered entity at the following link: http://opasnet.hrsa.gov/opa/default.aspx</p> <ul style="list-style-type: none"> - In the middle section of the Home page under "Contract Pharmacies," click the first option, "Search Contract Pharmacies." - Enter "D5HC2008" in the field marked "340B ID" and click "Search." - When the results display, click on the 340B ID on the left to display the contents of the record. <p>You may find it helpful to review the main OPA website from time to time, as we are continually adding new information. The website address is www.hrsa.gov/opa/.</p> <p>IMPORTANT: Note that when you purchase pharmaceuticals from manufacturers and wholesalers, MERCY MEDICAL CENTER should be invoiced and NOT FAMILY PHARMACY LLC. This requirement ensures that the covered entity has legal title to any drugs purchased.</p> <p>For additional assistance regarding general 340B issues and/or contract pharmacy, please contact the 340B prime vendor program at 1-888-340-2787 or by email at ApexusAnswers@340bpvp.com. Please reference your 340B ID number in the communication.</p> <p>You may also contact OPA at: Office of Pharmacy Affairs Mail Stop 10C-03 5600 Fishers Lane Rockville, MD 20857 Email: 340Bcontractpharmacy@hrsa.gov</p> <p>Subject: D5HC2008 Rejection of 340B contract pharmacy registration request</p> <p>HRSA's Office of Pharmacy Affairs (OPA) has received a request to register a contract pharmacy arrangement between MERCY MEDICAL CENTER at 301 ST. PAUL PLACE, BALTIMORE, MD 21202 and WAL-MART PHARMACY 10-1575 at 855 ORD DAM BLVD, OROVILLE, CA 95965. However, the authorizing official for the covered entity has rejected the request or allowed it to expire. The request number is CP000004 and was submitted on 3/2/2013.</p> <p>Requestor Information: Name: John Topper Title: CFO Telephone Number: 410-332-9313 Email Address: john.topper@fvc.org</p> <p>OPA does not know the reason why the contract pharmacy request was rejected or allowed it to expire. Please contact the covered entity's authorizing official for additional information.</p> <p>If the contract arrangement was rejected or allowed it to expire, you must register the contract pharmacy again and restart the process.</p> <p>For additional assistance regarding 340B contract pharmacy, please contact the 340B prime vendor program at 1-888-340-2787 or by email at ApexusAnswers@340bpvp.com. Please reference your 340B ID number in the communication.</p> <p>You may also contact OPA at: Office of Pharmacy Affairs Mail Stop 10C-03 5600 Fishers Lane Rockville, MD 20857 Email: 340Bcontractpharmacy@hrsa.gov</p>

REQUEST CONTRACT TERMINATIONS

Objectives:

- Requesting Contract Terminations
- Authorizing Official Approval/Rejection

REQUESTING CONTRACT TERMINATIONS

Helpful Tips for Requesting Contract Terminations



The request to terminate contract pharmacies is an automated online process.

The authorizing official is responsible for approving or rejecting the contract pharmacy termination requests.

Request for contract terminations for a selected covered entity can be made to an existing contract pharmacy during the registration process, **or** as a separate request.

The authorizing official has 15 calendar days to approve or reject each contract termination request.

If Authorizing Official does not approve or reject contract termination request within 15 calendar days, on calendar day 16, the contract terminate request is automatically “expired” by the system.



IMPORTANT: Use the buttons provided on the screens to navigate through the system. Refrain from using the browser back  and forward buttons, as they may take you out of the request for contract pharmacy termination process.


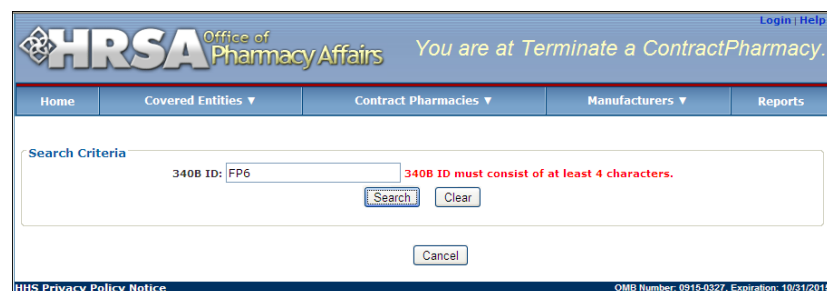
REQUESTING CONTRACT TERMINATIONS

DETAILS

Contract Pharmacy Terminations

1. Click on the Request Contract Terminations link on the **OPA 340B Homepage** and the **Search** screen displays.
- Links are available in the Contract Pharmacies menu bar or in the Contract Pharmacies section.
2. Enter a 340B ID number in the 340B ID field, which is validated in the system determines if the covered entity is actively participating in 340B Program.
3. Click the **Search** button and continue process.
- **Clear** button clears the field.
- A partial number can be entered, but must contain a minimum of four characters.

EXAMPLE

REQUESTING CONTRACT TERMINATIONS

DETAILS

Search Results

1. Click on a radio button next to the applicable 340B ID.
2. Click the **Continue** button and the **Request Terminations** screen displays.

Request Contract Terminations

- Active Contracts table only displays active contract pharmacies.
- Does not display contract pharmacies that are in "Submitted" status waiting on review by the authorizing official.
- **Cancel** button cancels the request and returns user to **OPA 340B Homepage**.

1. Click the checkbox(es) next to the pharmacy names requested to be terminated.
 2. Select a date using the calendar icon in the Requested Termination Date field, or enter a date (i.e., 2/28/2013).
- Termination Date can be a past, present, or future date.

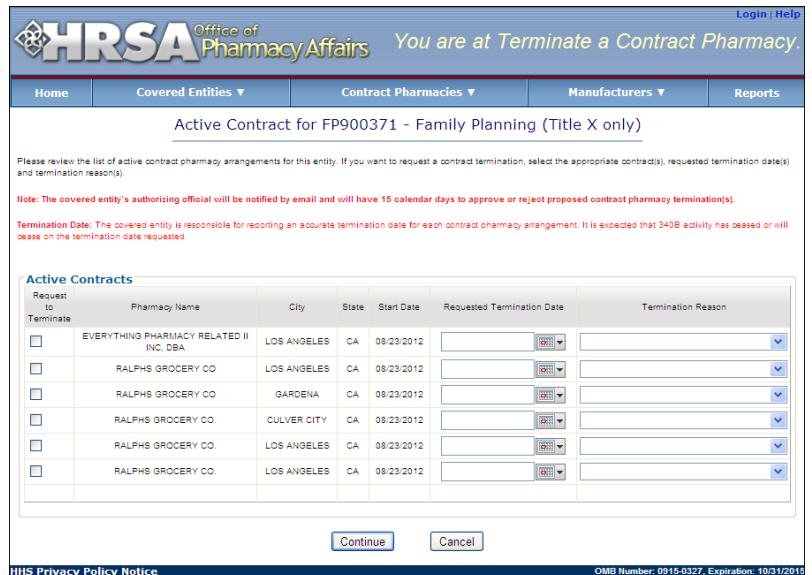
EXAMPLE



Search Results:
The number of rows returned: 3 Rows/Page: 10 Set Show Search Criteria

340B ID	Entity Type	Entity Name	Sub Name	Address	City	State	Start Date	Term Date	Edit Date
FP900093	FP	T.H.E. CLINIC INC	CLINIC	3834 SOUTH WESTERN AVENUE	LOS ANGELES	CA	01/01/1998		08/14/2012
FP900122	FP	CHINATOWN SERVICE CENTER	FAMILY HEALTH CLINIC	787 NORTH HILL STREET, SUITE 200	LOS ANGELES	CA	01/01/1999		03/07/2012
FP900371	FP	ST. JOHN'S WELL CHILD AND FAMILY CENTER		808 58th Street	LOS ANGELES	CA	04/01/2008		02/29/2012

Continue **Cancel**



Active Contract for FP900371 - Family Planning (Title X only)

Please review the list of active contract pharmacy arrangements for this entity. If you want to request a contract termination, select the appropriate contract(s), requested termination date(s) and termination reason(s).

Note: The covered entity's authorizing official will be notified by email and will have 15 calendar days to approve or reject proposed contract pharmacy termination(s).

Termination Date: The covered entity is responsible for reporting an accurate termination date for each contract pharmacy arrangement. It is expected that 340B activity has ceased or will cease on the termination date requested.

Request to Terminate	Pharmacy Name	City	State	Start Date	Requested Termination Date	Termination Reason
<input type="checkbox"/>	EVERYTHING PHARMACY RELATED II INC, DBA	LOS ANGELES	CA	08/23/2012		
<input type="checkbox"/>	RALPHS GROCERY CO	LOS ANGELES	CA	08/23/2012		
<input type="checkbox"/>	RALPHS GROCERY CO	GARDENA	CA	08/23/2012		
<input type="checkbox"/>	RALPHS GROCERY CO	CULVER CITY	CA	08/23/2012		
<input type="checkbox"/>	RALPHS GROCERY CO	LOS ANGELES	CA	08/23/2012		
<input type="checkbox"/>	RALPHS GROCERY CO	LOS ANGELES	CA	08/23/2012		

Continue **Cancel**



Active Contract for FP900371 - Family Planning (Title X only)

Please review the list of active contract pharmacy arrangements for this entity. If you want to request a contract termination, select the appropriate contract(s), requested termination date(s) and termination reason(s).

Note: The covered entity's authorizing official will be notified by email and will have 15 calendar days to approve or reject proposed contract pharmacy termination(s).

Termination Date: The covered entity is responsible for reporting an accurate termination date for each contract pharmacy arrangement. It is expected that 340B activity has ceased or will cease on the termination date requested.

Request to Terminate	Pharmacy Name	City	State	Start Date	Requested Termination Date	Termination Reason
<input checked="" type="checkbox"/>	EVERYTHING PHARMACY RELATED II INC, DBA	LOS ANGELES	CA	08/23/2012	2/28/2013	Business decision by covered entity
<input type="checkbox"/>	RALPHS GROCERY CO	LOS ANGELES	CA	08/23/2012		
<input type="checkbox"/>	RALPHS GROCERY CO	GARDENA	CA	08/23/2012		
<input type="checkbox"/>	RALPHS GROCERY CO	CULVER CITY	CA	08/23/2012		
<input type="checkbox"/>	RALPHS GROCERY CO	LOS ANGELES	CA	08/23/2012		
<input checked="" type="checkbox"/>	RALPHS GROCERY CO	LOS ANGELES	CA	08/23/2012	4/1/2013	Agreement registered in error

Continue **Cancel**

REQUESTING CONTRACT TERMINATIONS

DETAILS

- Click the calendar icon and the calendar displays.

- Select a termination reason from the drop-down list.



An error message displays when incorrect information or data is missing in a required field. The request cannot continue until errors are corrected.

- Click the **Continue** button and the **Requestor** screen displays.

EXAMPLE

HRSA Office of Pharmacy Affairs You are at Terminate a Contract Pharmacy.

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

Errors:
Termination Reason is Required
Termination Date is Required

Active Contract for FP900371 - Family Planning (Title X only)

Please review the list of active contract pharmacy arrangements for this entity. If you want to request a contract termination, select the appropriate contract(s), requested termination date(s) and termination reason(s).

Note: The covered entity's authorizing official will be notified by email and will have 15 calendar days to approve or reject proposed contract pharmacy termination(s).

Termination Date: The covered entity is responsible for reporting an accurate termination date for each contract pharmacy arrangement. It is expected that 340B activity has ceased or will cease on the termination date requested.

Request to Terminate	Pharmacy Name	City	State	Start Date	Requested Termination Date	Termination Reason
<input checked="" type="checkbox"/>	EVERYTHING PHARMACY RELATED II INC. DBA	LOS ANGELES	CA	08/23/2012	<input type="text"/>	
<input type="checkbox"/>	RALPHS GROCERY CO	LOS ANGELES	CA	08/23/2012	<input type="text"/>	
<input type="checkbox"/>	RALPHS GROCERY CO	GARDENA	CA	08/23/2012	<input type="text"/>	
<input type="checkbox"/>	RALPHS GROCERY CO	CULVER CITY	CA	08/23/2012	<input type="text"/>	
<input type="checkbox"/>	RALPHS GROCERY CO	LOS ANGELES	CA	08/23/2012	<input type="text"/>	
<input checked="" type="checkbox"/>	RALPHS GROCERY CO	LOS ANGELES	CA	08/23/2012	4/1/2013	Agreement registered in error

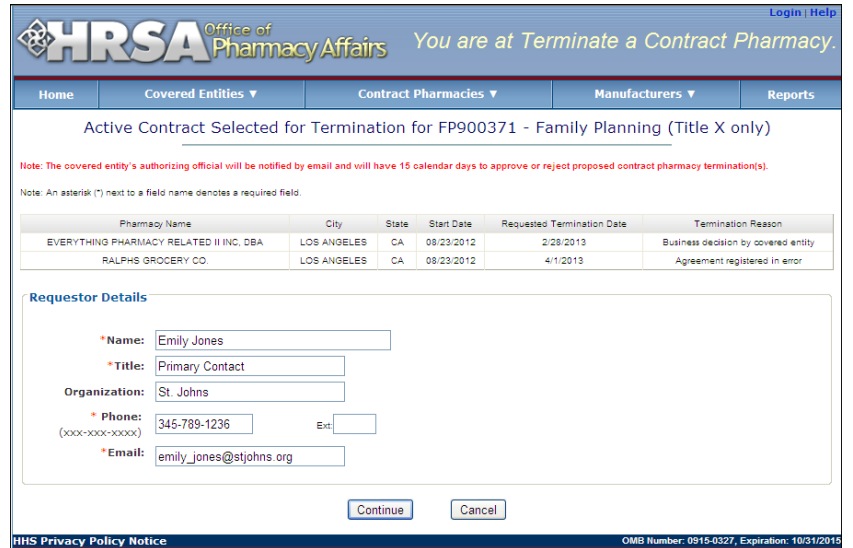
HHS Privacy Policy Notice OMB Number: 0915-0327, Expiration: 10/31/2015

REQUESTING CONTRACT TERMINATIONS

DETAILS

5. Enter requestor details.
 - Screen displays table with listing of requested pharmacies to be terminated and details.
 - Required fields are indicated with an asterisk (*).
6. Click the **Continue** button and the **Review** screen displays.
 - Once Continue button is selected, contract termination requests are validated and email notifications are sent.
7. Click the **Continue** button and the **Confirmation** screen displays.
8. Click the **Done** button and **OPA 340B Homepage** displays.

EXAMPLE



Requestor Details

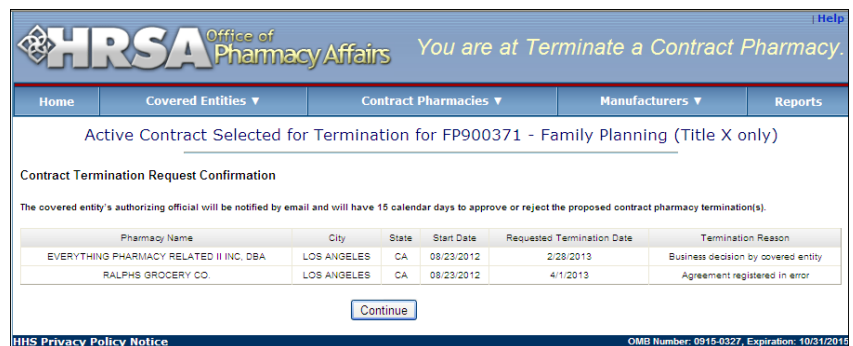
*Name:

*Title:

Organization:

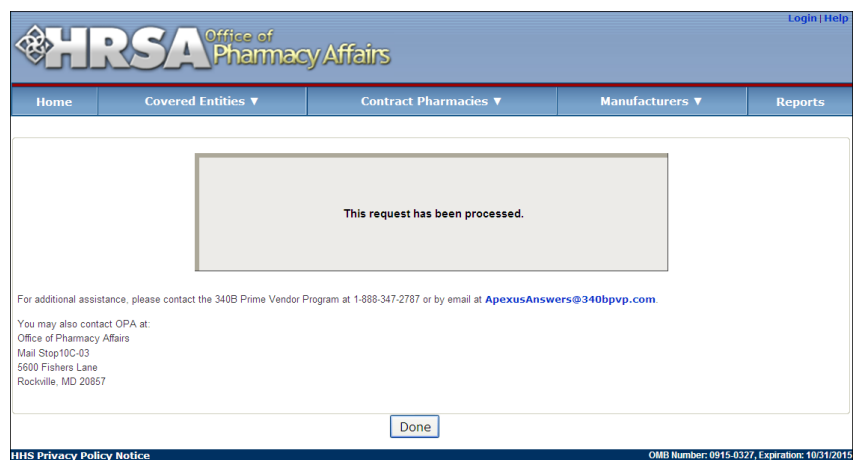
* Phone: Ext:

*Email:



Contract Termination Request Confirmation

The covered entity's authorizing official will be notified by email and will have 15 calendar days to approve or reject the proposed contract pharmacy termination(s).



This request has been processed.

For additional assistance, please contact the 340B Prime Vendor Program at 1-888-347-2787 or by email at ApexusAnswers@340bpvp.com.

You may also contact OPA at:
Office of Pharmacy Affairs
Mail Stop10C-03
5600 Fishers Lane
Rockville, MD 20857

REQUESTING CONTRACT TERMINATIONS

DETAILS

Email Notification

- Email is sent to Requestor, Contract Pharmacy Representative, and Primary Contact when validation is completed.

Approving or Rejecting Contract Pharmacy Termination Requests

- Click on the embedded link in email and the **Authorizing Official Approve/Reject** screen displays.

- Authorizing official receives an email verification notification with an embedded link.
- Authorizing official has 15-calendar days to approve or reject the request.
- On calendar day 16, the request automatically expires if no action is taken by authorizing official.
- The authorizing official has the option to use the embedded link for 15-calendar days to access the **Approve/Reject** screen until all pharmacy termination arrangements are approved or rejected.

Expired Termination Requests

- This screen displays when the authorizing official clicks on the embedded link for these reasons:
 - Request is “expired” as of calendar day-16 and is no longer eligible.
 - Request is already been acknowledged in the 340B database.

EXAMPLE

Subject: RW177936 Confirmation of contract pharmacy termination request

HRSA's Office of Pharmacy Affairs (OPA) has received one or more online contract pharmacy termination requests TR000013 for 340B covered entity ID RW177936 - ST. JOSE FOUNDATION, INC. at 6200 SAVOY DRIVE, SUITE 548, HOUSTON, TX 77036.

IMPORTANT: Requests expire on the 16th calendar day after entry if not accepted by the covered entity's authorizing official, as listed in the 340B program database. The authorizing official will receive a separate email with detailed instructions for accepting or rejecting the request.

The following contract pharmacy arrangements have been marked for termination, pending authorizing official approval:

AVITA DRUGS, 7382 LOUIS PASTEUR DR #105, SAN ANTONIO, TX 78228.

For additional assistance regarding 340B contract pharmacy, please contact the 340B prime vendor program at 1-888-340-2787 or by email at ApexusAnswers@340bvp.com. Please reference your 340B ID number in the communication.


You may also contact OPA at:

Office of Pharmacy Affairs
Mail Stop 10C-03
5600 Fishers Lane
Rockville, MD 20857
Email: 340Bcontractpharmacy@hhsa.gov

From: [Sandra Dederich](#)
To: [Sandra Dederich](#)
Cc:
Subject: FR000371 Request to Terminate contract pharmacy arrangement

HRSA's Office of Pharmacy Affairs (OPA) has received one or more online contract pharmacy termination requests TR000013 for 340B covered entity ID FR000371 - ST. JOHN'S WELL CHILD AND FAMILY CENTER at 808 58th Street, LOS ANGELES, CA 90037. Instructions: As the authorizing official on file for this entity in the 340B program database, you have 15 calendar days to approve or reject the termination request(s). On the 16th day, the request will automatically expire. This 340B contract pharmacy termination request was submitted by: Name: Emily Jones Title: Primary Contact Organization: St. John's Telephone Number: 345-799-1235 Email: emily_jones@stjohns.org To approve or reject request to terminate contract pharmacy arrangement(s), click here: https://www.hhsa.gov/contractpharmacy/terminations/official_approve_reject

For additional assistance regarding 340B contract pharmacy, please contact the 340B prime vendor program at 1-888-340-2787 or by email at ApexusAnswers@340bvp.com. Please reference your 340B ID number in the communication. You may also contact OPA at: Office of Pharmacy Affairs Mail Stop 10C-03 5600 Fishers Lane Rockville, MD 20857 Email: 340Bcontractpharmacy@hhsa.gov


You are at Terminate a Contract Pharmacy.

[Home](#)
[Covered Entities ▼](#)
[Contract Pharmacies ▼](#)
[Manufacturers ▼](#)
[Reports](#)

This request to terminate contract pharmacy arrangement(s) has either expired and is no longer eligible or has already been acknowledged in the 340B program database. Please review the covered entity record and submit a new contract pharmacy termination request.

[Close](#)

For additional assistance regarding 340B contract pharmacy, please contact the 340B prime vendor program at 1-888-340-2787 or by email at ApexusAnswers@340bvp.com. Please reference your 340B ID number in the communication.

You may also contact OPA at:
Office of Pharmacy Affairs
Mail Stop 10C-03
5600 Fishers Lane
Rockville, MD 20857
Email: 340Bcontractpharmacy@hhsa.gov

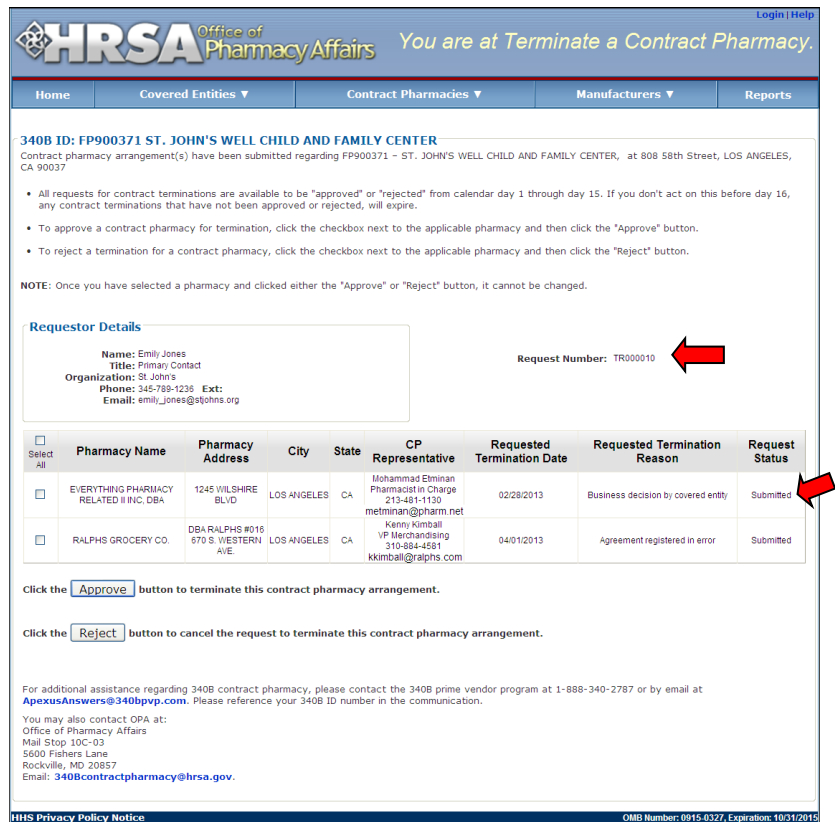
HHS Privacy Policy Notice
OMB Number: 0915-0327, Expiration: 10/31/2015

AO APPROVE / REJECT CONTRACT TERMINATIONS

DETAILS

- Each contract termination request is assigned a unique Request Number (i.e., TR000010).
- Contract terminations are initially assigned a status of "Submitted".
- Status updates are:
 - Approve:** contract pharmacy termination status is "AO Approved" for termination with the selected covered entity in the 340B Drug Program.
 - Reject:** contract pharmacy termination status is "AO Rejected", and contractual relationship continues with no disruption with the selected covered entity in the 340B Drug Program.
- Select All checkbox allows user to select all pharmacies in the table and then click the "Approve" or "Reject" button to update the status for all.
- Once a contract pharmacy termination request is approved or rejected, there is no option to change the status.

EXAMPLE



HRSA Office of Pharmacy Affairs You are at Terminate a Contract Pharmacy.

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

340B ID: FP900371 ST. JOHN'S WELL CHILD AND FAMILY CENTER
 Contract pharmacy arrangement(s) have been submitted regarding FP900371 - ST. JOHN'S WELL CHILD AND FAMILY CENTER, at 808 58th Street, LOS ANGELES, CA 90037

- All requests for contract terminations are available to be "approved" or "rejected" from calendar day 1 through day 15. If you don't act on this before day 16, any contract terminations that have not been approved or rejected, will expire.
- To approve a contract pharmacy for termination, click the checkbox next to the applicable pharmacy and then click the "Approve" button.
- To reject a termination for a contract pharmacy, click the checkbox next to the applicable pharmacy and then click the "Reject" button.

NOTE: Once you have selected a pharmacy and clicked either the "Approve" or "Reject" button, it cannot be changed.

Requestor Details

Name: Emily Jones
 Title: Primary Contact
 Organization: St John's
 Phone: 345-789-1236 Ext:
 Email: emily_jones@stjohns.org

Request Number: TR000010

<input type="checkbox"/> Select All	Pharmacy Name	Pharmacy Address	City	State	CP Representative	Requested Termination Date	Requested Termination Reason	Request Status
<input type="checkbox"/>	EVERYTHING PHARMACY RELATED II INC, DBA	1245 WILSHIRE BLVD	LOS ANGELES	CA	Mohammad Elminan Pharmacist in Charge 213-481-1139 metminan@pharm.net	02/28/2013	Business decision by covered entity	Submitted
<input type="checkbox"/>	RALPHS GROCERY CO.	DBA RALPHS #016 670 S. WESTERN AVE.	LOS ANGELES	CA	Kenny Kimball VP Merchandising 310-884-4581 kkimball@ralphs.com	04/01/2013	Agreement registered in error	Submitted

Click the **Approve** button to terminate this contract pharmacy arrangement.

Click the **Reject** button to cancel the request to terminate this contract pharmacy arrangement.

For additional assistance regarding 340B contract pharmacy, please contact the 340B prime vendor program at 1-888-340-2787 or by email at ApexusAnswers@340bvpv.com. Please reference your 340B ID number in the communication.

You may also contact OPA at:
 Office of Pharmacy Affairs
 Mail Stop 10C-03
 5600 Fishers Lane
 Rockville, MD 20857
 Email: 340Bcontractpharmacy@hrsa.gov.

HHS Privacy Policy Notice OMB Number: 0915-0327, Expiration: 10/31/2015

AO APPROVE / REJECT CONTRACT TERMINATIONS

DETAILS

- Click a checkbox next to the applicable pharmacy name.
or
Click the Select All checkbox to select all pharmacies listed.
- Click the **Reject** or **Approve** button and the status is updated for selected pharmacy to:
 - AO Rejected
 - AO Approved
 - Confirmation or rejection email notifications are sent as each contract termination request is updated.
 - An error message displays if the "Approve" or "Reject" buttons are clicked multiple times for same Pharmacy.

Errors:
You have already Approved or Rejected this request.
- Click the **Done** button and the **Confirmation** screen displays.
- Click the **Done** button and the **OPA 340B Homepage** displays.

EXAMPLE

<input type="checkbox"/> Select All	Pharmacy Name	Pharmacy Address	City	State	CP Representative	Requested Termination Date	Requested Termination Reason	Request Status
<input checked="" type="checkbox"/>	EVERYTHING PHARMACY RELATED II INC. DBA	1245 WILSHIRE BLVD	LOS ANGELES	CA	Mohammad Elminan Pharmacist in Charge 213-481-1130 metminan@pharm.net	02/28/2013	Business decision by covered entity	Submitted
<input type="checkbox"/>	RALPHS GROCERY CO.	DBA RALPHS #016 670 S. WESTERN AVE.	LOS ANGELES	CA	Kenny Kimball VP Merchandising 310-884-4581	04/01/2013	Agreement registered in error	Submitted

HRSA Office of Pharmacy Affairs You are at **Terminate a Contract Pharmacy.** [Login | Help](#)

Home Covered Entities ▼ Contract Pharmacies ▼ Manufacturers ▼ Reports

340B ID: FP900371 ST. JOHN'S WELL CHILD AND FAMILY CENTER
Contract pharmacy arrangement(s) have been submitted regarding FP900371 - ST. JOHN'S WELL CHILD AND FAMILY CENTER, at 808 58th Street, LOS ANGELES, CA 90037

- All requests for contract terminations are available to be "approved" or "rejected" from calendar day 1 through day 15. If you don't act on this before day 16, any contract terminations that have not been approved or rejected, will expire.
- To approve a contract pharmacy for termination, click the checkbox next to the applicable pharmacy and then click the "Approve" button.
- To reject a termination for a contract pharmacy, click the checkbox next to the applicable pharmacy and then click the "Reject" button.

NOTE: Once you have selected a pharmacy and clicked either the "Approve" or "Reject" button, it cannot be changed.

Requestor Details

Name: Emily Jones
Title: Primary Contact
Organization: St John's
Phone: 345-789-1236 Ext:
Email: emily_jones@stjohns.org

Request Number: TR000010

Pharmacy Name	Pharmacy Address	City	State	CP Representative	Requested Termination Date	Requested Termination Reason	Request Status
EVERYTHING PHARMACY RELATED II INC. DBA	1245 WILSHIRE BLVD	LOS ANGELES	CA	Mohammad Elminan Pharmacist in Charge 213-481-1130 metminan@pharm.net	02/28/2013	Business decision by covered entity	AO Approved
RALPHS GROCERY CO.	DBA RALPHS #016 670 S. WESTERN AVE.	LOS ANGELES	CA	Kenny Kimball VP Merchandising 310-884-4581 kkimball@ralphs.com	04/01/2013	Agreement registered in error	AO Rejected

[Done](#)

For additional assistance regarding 340B contract pharmacy, please contact the 340B prime vendor program at 1-888-340-2787 or by email at ApexusAnswers@340bpvp.com. Please reference your 340B ID number in the communication.

You may also contact OPA at:
Office of Pharmacy Affairs
Mail Stop 10C-03
5600 Fishers Lane
Rockville, MD 20857
Email: 340Bcontractpharmacy@hrsa.gov.

HHS Privacy Policy Notice OMB Number: 0915-0327, Expiration: 10/31/2015

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This request has been processed.

For additional assistance, please contact the 340B Prime Vendor Program at 1-888-347-2787 or by email at ApexusAnswers@340bpvp.com.

You may also contact OPA at:
Office of Pharmacy Affairs
Mail Stop 10C-03
5600 Fishers Lane
Rockville, MD 20857

[Done](#)

HHS Privacy Policy Notice OMB Number: 0915-0327, Expiration: 10/31/2015

AO APPROVE / REJECT CONTRACT TERMINATIONS	
DETAILS	EXAMPLE
<p>Email Confirmation</p> <ul style="list-style-type: none"> System generated confirmation email provides: <ul style="list-style-type: none"> Effective termination date when the contract pharmacy arrangement is terminated from participating with the selected covered entity in the 340B Drug Program. Termination reason. Requestor information. 340B ID of the covered entity Easy-to-follow instructions to access this information in the OPA 340B System. Email is sent to: <ul style="list-style-type: none"> Requestor Authorizing Official Contract Pharmacy Rep <p>Rejection/Expiration Notification</p> <ul style="list-style-type: none"> System generated rejection or expiration email provides: <ul style="list-style-type: none"> Request number and date of submission. Requestor information. Email is sent to: <ul style="list-style-type: none"> Requestor Authorizing Official Contract Pharmacy Rep 	<div> <p>Subject: FPM0011 Confirmation of 340B contract pharmacy termination</p> <p>HRSA's Office of Pharmacy Affairs (OPA) has received a request to terminate a contract pharmacy arrangement between ST. JOHN'S WELL CHILD AND FAMILY CENTER at 808 58th Street, LOS ANGELES, CA 90037 and EVERYTHING PHARMACY RELATED II INC, DBA at 1245 WILSHIRE BLVD, LOS ANGELES, CA 90037 - 4810. The termination date is 3/28/2013 and the termination reason has been recorded as "Business decision by covered entity".</p> <p>This request TR000018 was submitted by:</p> <p>Requestor Information:</p> <p>Name: Emily Jones</p> <p>Title: Primary Contact</p> <p>Telephone Number: 345-789-1236</p> <p>Email Address: emily_jones@stjohns.org</p> <p>Please verify the information on file for the covered entity at the following link: http://opasnet.hrsa.gov/opa/default.aspx</p> <p>- In the middle section of the Home page under "Contract Pharmacies," click the first option, "Search Contract Pharmacies."</p> <p>- Enter "FPM00071" in the field marked "340B ID" and click "Search."</p> <p>- When the results display, click on the 340B ID on the left to display the contents of the record.</p> <p>You may find it helpful to review the main OPA website from time to time, as we are continually adding new information. The website address is www.hrsa.gov/opa/.</p> <p>For additional assistance regarding general 340B issues and/or contract pharmacy, please contact the 340B prime vendor program at 1-888-340-2787 or by email at ApexusAssures@340b.gov. Please reference your 340B ID number in the communication.</p> <p>You may also contact OPA at:</p> <p>Office of Pharmacy Affairs Mail Stop 10C-03 5600 Fishers Lane Rockville, MD 20857 Email: 340Bcontractpharmacy@hrsa.gov</p> </div> <div> <p>Subject: FPM00071 Rejection of 340B contract pharmacy termination request</p> <p>HRSA's Office of Pharmacy Affairs (OPA) has received a request to terminate a contract pharmacy arrangement between ST. JOHN'S WELL CHILD AND FAMILY CENTER at 808 58th Street, LOS ANGELES, CA 90037 and RALPHS GROCERY CO. at DBA RALPHS #016, 670 S. WESTERN AVE., LOS ANGELES, CA 90005. However, the authorizing official for the covered entity has rejected the request or allowed it to expire.</p> <p>The request number is TR000010 and was submitted on 3/6/2013.</p> <p>Requestor Information:</p> <p>Name: Emily Jones</p> <p>Title: Primary Contact</p> <p>Telephone Number: 345-789-1236</p> <p>Email Address: emily_jones@stjohns.org</p> <p>OPA does not know the reason why the contract pharmacy request was rejected or allowed to expire. Please contact the covered entity's authorizing official for additional information.</p> <p>If the contract arrangement was rejected or allowed to expire in error, you must register the contract pharmacy again and restart the process.</p> <p>For additional assistance regarding 340B contract pharmacy, please contact the 340B prime vendor program at 1-888-340-2787 or by email at ApexusAssures@340b.gov. Please reference your 340B ID number in the communication.</p> <p>You may also contact OPA at:</p> <p>Office of Pharmacy Affairs Mail Stop 10C-03 5600 Fishers Lane Rockville, MD 20857 Email: 340Bcontractpharmacy@hrsa.gov</p> </div>

APPENDIX A – CONTRACT PHARMACY SEARCH EXPORT DATA DICTIONARY

Field Name	Field Description
340B ID	A unique identification number provided by the OPA to identify a 340B eligible entity in the OPA database. This 340B ID is used to purchase 340B drugs.
Entity Name	Name of the covered entity (main-site)
Entity Sub-Division Name	Name of the sub-division/outpatient facility affiliated with the covered entity (main site)
Approved	<p>The OPA database uses "approved" to denote if an entity has been approved by the OPA to participate in the 340B program. Please note that an entity may be approved but may not be participating until a future start date.</p> <p>TRUE indicates that a covered entity is approved. FALSE indicates that a covered entity is not approved. Applies to all entity types.</p>
Participating	<p>The OPA database uses "participating" to denote if an entity is active in the 340B program.</p> <p>YES indicates that a covered entity is participating. NO indicates that a covered entity is not participating. Applies to all entity types.</p>
Entity Address 1	Address 1 of the covered entity
Entity Address 2	Address 2 of the covered entity
Entity City	City of the covered entity
Entity State	State of the covered entity
Entity Zip	Zip of the covered entity
Entity Second Zip	Second zip of the covered entity
CE Signed By Name	Name of the individual that signed and authorized the contract pharmacy registration (CE Authorizing Official). For contracts created prior to 3/28/2013, this field contains the name of the CE Signing Official (related to the contract).
CE Signed By Title	Title of the individual that signed and authorized the contract pharmacy registration (CE Authorizing Official). For contracts created prior to 3/28/2013, this field contains the title of the CE Signing Official (related to the contract).

CE Signed By Telephone	Phone number of the individual that signed and authorized the contract pharmacy registration (CE Authorizing Official). For contracts created prior to 3/28/2013, this field contains the phone number of the CE Signing Official (related to the contract).
CE Signed By Extension	Phone extension of the individual that signed and authorized the contract pharmacy registration (CE Authorizing Official). For contracts created prior to 3/28/2013, this field contains the phone extension of the CE Signing Official (related to the contract).
Contract Begin Date	The OPA database uses "contract begin date" to denote the contract pharmacy start date in the 340B program. This is usually the first day of the quarter.
Contract Approval Date	The OPA database uses "contract approval date" to denote the date that the OPA approved the contract for participation in the 340B program. This is usually the first day of the quarter.
Contract Term Date	The OPA database uses "contract termination date" to denote when a contract pharmacy was/is going to be terminated in the 340B Program.
Pharmacy Name	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the name of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, pharmacy name information is provided by the DEA.</p>
Pharmacy Address 1	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the address line 1 of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, address line 1 information is provided by the DEA.</p>
Pharmacy Address 2	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the address line 2 of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, address line 2 information is provided by the DEA.</p>

Pharmacy Address 3	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the address line 3 of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, address line 3 information is provided by the DEA.</p>
Pharmacy City	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the city of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, city information is provided by the DEA.</p>
Pharmacy State	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the state of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, state information is provided by the DEA.</p>
Pharmacy Zip	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the zip of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, zip information is provided by the DEA.</p>
Pharmacy Second Zip	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the second zip of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, second zip information is provided by the DEA.</p>

Contract Pharmacy Rep Name	<p>During contract pharmacy registration, a contract pharmacy representative must be designated for each contract pharmacy relationship.</p> <p>Indicates the name of the contract pharmacy representative for contracts created as of 3/28/2013. For contracts created prior to 3/28/2013, this field contains the name of the contract pharmacy primary contact. The contract pharmacy primary contact is no longer being used and has been replaced by the contract pharmacy representative.</p>
Contract Pharmacy Rep Title	<p>During contract pharmacy registration, a contract pharmacy representative must be designated for each contract pharmacy relationship.</p> <p>Indicates the title of the contract pharmacy representative for contracts created as of 3/28/2013. For contracts created prior to 3/28/2013, this field contains the title of the contract pharmacy primary contact. The contract pharmacy primary contact is no longer being used and has been replaced by the contract pharmacy representative.</p>
Contract Pharmacy Rep Telephone	<p>During contract pharmacy registration, a contract pharmacy representative must be designated for each contract pharmacy relationship.</p> <p>Indicates the phone number of the contract pharmacy representative for contracts created as of 3/28/2013. For contracts created prior to 3/28/2013, this field contains the phone number of the contract pharmacy primary contact. The contract pharmacy primary contact is no longer being used and has been replaced by the contract pharmacy representative.</p>
Contract Pharmacy Rep Telephone Extension	<p>During contract pharmacy registration, a contract pharmacy representative must be designated for each contract pharmacy relationship.</p> <p>Indicates the phone extension of the contract pharmacy representative for contracts created as of 3/28/2013, if applicable. For contracts created prior to 3/28/2013, this field contains the phone number of the contract pharmacy primary contact. The contract pharmacy primary contact is no longer being used and has been replaced by the contract pharmacy representative.</p>
CP Signed By Name	<p>The CP Signed By Name is no longer being used. Data displayed is for contracts created prior to 3/28/2013. Contracts created after 3/28/2013 will not have CP Signed By information populated.</p>
CP Signed By Title	<p>The CP Signed By Title is no longer being used. Data displayed is for contracts created prior to 3/28/2013. Contracts created after 3/28/2013 will not have CP Signed By information populated.</p>

CP Signed By Telephone	The CP Signed By Telephone is no longer being used. Data displayed is for contracts created prior to 3/28/2013. Contracts created after 3/28/2013 will not have CP Signed By information populated.
CP Signed By Telephone Extension	The CP Signed By Telephone Extension is no longer being used. Data displayed is for contracts created prior to 3/28/2013. Contracts created after 3/28/2013 will not have CP Signed By information populated.
Edit Date	The OPA database uses "edit date" to denote the date that the contract record was last edited. Edits to the OPA database can occur at any time.

APPENDIX B - CONTRACT PHARMACY DAILY REPORT DATA DICTIONARY

Description: The CP Daily Report is generated daily at 12:00AM and reflects data from the previous day. For real-time updates, please use the export functionality under Search Contract Pharmacies.

Field Name	Field Description
340B ID	A unique identification number provided by the OPA to identify a 340B eligible entity in the OPA database. This 340B ID is used to purchase 340B drugs.
Entity Name	Name of the covered entity (main-site)
Entity Sub-Division Name	Name of the sub-division/outpatient facility affiliated with the covered entity (main site)
Approved	<p>The OPA database uses "approved" to denote if an entity has been approved by the OPA to participate in the 340B program. Please note that an entity may be approved but may not be participating until a future start date.</p> <p>TRUE indicates that a covered entity is approved. FALSE indicates that a covered entity is not approved. Applies to all entity types.</p>
Participating	<p>The OPA database uses "participating" to denote if an entity is active in the 340B program.</p> <p>YES indicates that a covered entity is participating. NO indicates that a covered entity is not participating. Applies to all entity types.</p>
CE Add Date	The OPA database uses "CE add date" to denote an entity's start date in the 340B program. CE add date is the same as participating start date.
CE Term Date	The OPA database uses "termination date" to denote when a covered entity was/is going to be terminated in the 340B Program. As of this date, the entity may no longer purchase or use 340B drugs. Termination dates are updated on a quarterly basis.
Entity Address 1	Address 1 of the covered entity
Entity Address 2	Address 2 of the covered entity
Entity City	City of the covered entity
Entity State	State of the covered entity
Entity Zip	Zip of the covered entity
Entity Second Zip	Second zip of the covered entity

Entity Contact Name	The Entity Contact Name (related to the contract) is no longer being used. Data displayed is for contracts created prior to 3/28/2013. Contracts created after 3/28/2013 will not have CE contact information populated.
CE Contact Title	The CE Contact Title(related to the contract) is no longer being used. Data displayed is for contracts created prior to 3/28/2013. Contracts created after 3/28/2013 will not have CE contact information populated.
CE Contact Telephone	The CE Contact Telephone (related to the contract) is no longer being used. Data displayed is for contracts created prior to 3/28/2013. Contracts created after 3/28/2013 will not have CE contact information populated.
CE Contact Telephone Extension	The CE Contact Telephone Extension (related to the contract) is no longer being used. Data displayed is for contracts created prior to 3/28/2013. Contracts created after 3/28/2013 will not have CE contact information populated.
CE Signed By Name	Name of the individual that signed and authorized the contract pharmacy registration (CE Authorizing Official). For contracts created prior to 3/28/2013, this field contains the name of the CE Signing Official (related to the contract).
CE Signed By Title	Title of the individual that signed and authorized the contract pharmacy registration (CE Authorizing Official). For contracts created prior to 3/28/2013, this field contains the title of the CE Signing Official (related to the contract).
CE Signed By Date	Date that the individual signed and authorized the contract pharmacy registration (CE Authorizing Official). For contracts created prior to 3/28/2013, this field contains the date that the CE Signing Official signed (related to the contract).
CE Signed By Telephone	Phone number of the individual that signed and authorized the contract pharmacy registration (CE Authorizing Official). For contracts created prior to 3/28/2013, this field contains the phone number of the CE Signing Official (related to the contract).
CE Signed By Telephone Extension	Phone extension of the individual that signed and authorized the contract pharmacy registration (CE Authorizing Official). For contracts created prior to 3/28/2013, this field contains the phone extension of the CE Signing Official (related to the contract).
Contract Begin Date	The OPA database uses "contract begin date" to denote the contract pharmacy start date in the 340B program. This is usually the first day of the quarter.
Contract Termination Date	The OPA database uses "contract termination date" to denote when a contract pharmacy was/is going to be terminated in the 340B Program.

Pharmacy Name	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the name of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, pharmacy name information is provided by the DEA.</p>
Pharmacy Address 1	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the address line 1 of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, address line 1 information is provided by the DEA.</p>
Pharmacy Address 2	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the address line 2 of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, address line 2 information is provided by the DEA.</p>
Pharmacy City	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the city of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, city information is provided by the DEA.</p>
Pharmacy State	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the state of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, state information is provided by the DEA.</p>
Pharmacy Zip	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the zip of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, zip information is provided by the DEA.</p>

Pharmacy Second Zip	<p>Many 340B covered entities elect to dispense 340B drugs to patients through contract pharmacy services, an arrangement in which the 340B covered entity signs a contract with a pharmacy to provide pharmacy services.</p> <p>Indicates the second zip of a pharmacy providing contract pharmacy services. For pharmacies with a DEA number, second zip information is provided by the DEA.</p>
Pharmacy Contact Name	<p>During contract pharmacy registration, a contract pharmacy representative must be designated for each contract pharmacy relationship.</p> <p>Indicates the name of the contract pharmacy representative for contracts created as of 3/28/2013. For contracts created prior to 3/28/2013, this field contains the name of the contract pharmacy primary contact. The contract pharmacy primary contact is no longer being used and has been replaced by the contract pharmacy representative.</p>
CP Contact Title	<p>During contract pharmacy registration, a contract pharmacy representative must be designated for each contract pharmacy relationship.</p> <p>Indicates the title of the contract pharmacy representative for contracts created as of 3/28/2013. For contracts created prior to 3/28/2013, this field contains the title of the contract pharmacy primary contact. The contract pharmacy primary contact is no longer being used and has been replaced by the contract pharmacy representative.</p>
CP Contact Telephone	<p>During contract pharmacy registration, a contract pharmacy representative must be designated for each contract pharmacy relationship.</p> <p>Indicates the phone number of the contract pharmacy representative for contracts created as of 3/28/2013. For contracts created prior to 3/28/2013, this field contains the phone number of the contract pharmacy primary contact. The contract pharmacy primary contact is no longer being used and has been replaced by the contract pharmacy representative.</p>
CP Contact Telephone Extension	<p>During contract pharmacy registration, a contract pharmacy representative must be designated for each contract pharmacy relationship.</p> <p>Indicates the phone extension of the contract pharmacy representative for contracts created as of 3/28/2013, if applicable. For contracts created prior to 3/28/2013, this field contains the phone number of the contract pharmacy primary contact. The contract pharmacy primary contact is no longer being used and has been replaced by the contract pharmacy representative.</p>

CP Signed By Name	The CP Signed By Name is no longer being used. Data displayed is for contracts created prior to 3/28/2013. Contracts created after 3/28/2013 will not have CP Signed By information populated.
CP Signed By Title	The CP Signed By Title is no longer being used. Data displayed is for contracts created prior to 3/28/2013. Contracts created after 3/28/2013 will not have CP Signed By information populated.
CP Signed By Date	The CP Signed By Date is no longer being used. Data displayed is for contracts created prior to 3/28/2013. Contracts created after 3/28/2013 will not have CP Signed By information populated.
CP Signed By Telephone	The CP Signed By Telephone is no longer being used. Data displayed is for contracts created prior to 3/28/2013. Contracts created after 3/28/2013 will not have CP Signed By information populated.
CP Signed By Telephone Extension	The CP Signed By Telephone Extension is no longer being used. Data displayed is for contracts created prior to 3/28/2013. Contracts created after 3/28/2013 will not have CP Signed By information populated.
Contract Comments	Comments entered by the user during registration that are contract specific.
Edit Date	The OPA database uses "edit date" to denote the date that the contract record was last edited. Edits to the OPA database can occur at any time.